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| Fill in this information to identify your case: | |
|---|-------------------------------|
| United States Bankruptcy Court for the: | |
| Northern District of: Illinois (State) | |
| Case number (if known) | Chapter you are filing under: |
| | Chapter 7 Chapter 11 |
| | Chapter 12 Chapter 13 |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa | art 1: Identify Yourself | | |
|----|--|----------------------------|---|
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your full name | Makeyla | |
| | MAZIA III. a a a a a a III. a I Za a a | First name | First name |
| | Write the name that is on your government-issued | S. | NC LU |
| | picture identification (for example, your driver's | Middle name | Middle name |
| | license or passport | Calvin Last name | Last name |
| | Bring your picture | | |
| | identification to your meeting with the trustee. | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III) |
| 2. | All other names you | | |
| | have used in the last | First name | First name |
| | 8 years | Mi dello poppo | Middlemans |
| | Include your married or | Middle name | Middle name |
| | maiden names. | Last name | Last name |
| | | First name | First name |
| | | | |
| | | Middle name | Middle name |
| | | Last name | Last name |
| 3. | Only the last 4 digits of your Social | XXX - XX- 8409 | xxx - xx- |
| | Security number or federal Individual | OR | OR |
| | Taxpayer Identification number | 9 xx - xx- | 9 xx - xx- |
| | (ITIN) | | |

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| Debtor 1 Makeyla First Name | S. Middle Name | Calvin Last Name | Case number (if known) |
|--|---|--|--|
| | About Debtor 1: | | About Debtor 2 (Spouse Only in a Joint Case): |
| 4. Any business names and Employer | ✓ I have not used any | business names or EINs. | I have not used any business names or EINs. |
| Identification Numbers (EIN) you have used in the last | Business name | | Business name |
| 8 years Include trade names and | Business name | | Business name |
| doing business as names | | | EIN |
| | EIN | | EIN |
| 5. Where you live | 9312 S Kedzie Ave Apt Ge | <u>a</u> | If Debtor 2 lives at a different address: |
| | Number Street | | Number Street |
| | Evergreen Pk Illino City State | | City State Zip Code |
| | Cook County | | County |
| | If your mailing address above, fill it in here. No notices to you at this mai | s is different from the one ote that the court will send an illing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
| | Number Street | | Number Street |
| | City S | State Zip Code | City State Zip Code |
| 6. Why you are choosing this district to file for bankruptcy | lived in this district lo | ys before filing this petition, I had brigger than in any other district. n. Explain. (See 28 U.S.C. §§ 1 | lived in this district longer than in any other district. |
| | | | |

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| De | ebtor 1 Makeyla | S. | Calvin | | Case number (if kno | own) | | |
|-----|---|---|---|----------------|--|---|----------------------------|--|
| | First Name | Middle Nam | | | | | | |
| Pa | rt 2: Tell the Court Abo | out Your Bankrup | tcy Case | | | | | |
| 7. | The chapter of the Bankruptcy Code you are choosing to file under | | brief description of each, sent B2010)). Also, go to the top | | | | ndividuals Filing for | |
| 8. | How you will pay the fee | ✓ I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. ☐ I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay Your Filing Fee in Installments (Official Form 103A). ☐ I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. | | | | | | |
| 9. | Have you filed for bankruptcy within the last 8 years? | No. Yes. District District District | Northern District of Illinois Northern District of Illinois | When When When | 4/25/2012 MM / DD / YYYY 8/14/2014 MM / DD / YYYY | Case number _ Case number _ Case number _ | 2012bk16924 2014bk29987 | |
| 10. | Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | Yes. Debtor District Debtor District | | When When | MM / DD / YYYY | Relationship to Case number, Relationship to Case number, | you | |
| 11. | Do you rent your residence? | ✓ No. | e 12. r landlord obtained an eviction Go to line 12. Fill out <i>Initial Statement About</i> this bankruptcy petition. | | | st You (Form 10 | 1A) and file it with | |

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Calvin Debtor 1 Makeyla S __ Case number (if known) Middle Name First Name Last Name Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole No. Go to Part 4. **✓** proprietor of any fullor part-time Yes. Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than City State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set Chapter 11 of the appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance **Bankruptcy Code and** sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). are you a small business debtor? No. I am not filing under Chapter 11. V For a definition of small business debtor, No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the see 11 U.S.C. § Bankruptcy Code. 101(51D). Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have $\overline{}$ No. any property that Yes. What is the hazard? poses or is alleged to pose a threat of imminent and If immediate attention is needed, why is it needed? identifiable hazard to public health or safety? Or do you Where is the property? own any property Street Number that needs immediate attention? For example, do you own perishable goods, City State Zip Code or livestock that must be fed, or a building that needs urgent repairs?

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 Debtor 1 First Name
 Makeyla
 S.
 Calvin
 Case number (if known)

 Last Name

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I counseling agency within the 180 days before I about credit filed this bankruptcy petition, and I received a filed this bankruptcy petition, and I received a counseling. certificate of completion. certificate of completion. Attach a copy of the certificate and the payment plan. Attach a copy of the certificate and the payment plan. The law requires that if any, that you developed with the agency. if any, that you developed with the agency. you receive a briefing about credit ☐ I received a briefing from an approved credit I received a briefing from an approved credit counseling before you counseling agency within the 180 days before I counseling agency within the 180 days before I file for bankruptcy. filed this bankruptcy petition, but I do not have a filed this bankruptcy petition, but I do not have a certificate of completion. certificate of completion. You must truthfully check one of the Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, following choices. If you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment you cannot do so, you are not eligible to file. I certify that I asked for credit counseling services I certify that I asked for credit counseling services from an approved agency, but was unable to from an approved agency, but was unable to If you file anyway, the obtain those services during the 7 days after I obtain those services during the 7 days after I court can dismiss your made my request, and exigent circumstances made my request, and exigent circumstances case, you will lose merit a 30-day temporary waiver of the merit a 30-day temporary waiver of the whatever filing fee you requirement. requirement. paid, and your creditors can begin To ask for a 30-day temporary waiver of the To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what requirement, attach a separate sheet explaining what collection activities efforts you made to obtain the briefing, why you were efforts you made to obtain the briefing, why you were again. unable to obtain it before you filed for bankruptcy, and unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this what exigent circumstances required you to file this Your case may be dismissed if the court is dissatisfied Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before with your reasons for not receiving a briefing before you filed for bankruptcy. you filed for bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. If you do not do so, your case may be dismissed. Any extension of the 30-day deadline is granted only Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: Incapacity. I have a mental illness or a mental Incapacity. I have a mental illness or a mental deficiency that makes me deficiency that makes me incapable of realizing or making incapable of realizing or making rational decisions about finances. rational decisions about finances. My physical disability causes me to Disability. My physical disability causes me to Disability. be unable to participate in a be unable to participate in a briefing in person, by phone, or briefing in person, by phone, or through the internet, even after I through the internet, even after I reasonably tried to do so. reasonably tried to do so. Active duty. I am currently on active military Active duty. I am currently on active military duty in a military combat zone. duty in a military combat zone. If you believe you are not required to receive a briefing If you believe you are not required to receive a briefing about credit counseling, you must file a motion for about credit counseling, you must file a motion for waiver of credit counseling with the court. waiver of credit counseling with the court.

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| Debtor 1 Makeyla First Name | | Calvin ast Name | Case number (if known) | | | | | |
|---|---|---|---|---|--|--|--|--|
| Part 6: Answer These Qu | estions for Reporting Purposes | | | | | | | |
| 16. What kind of debts do you have? | 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. | | | | | | | |
| 17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | expenses are paid that fu | 7. Do you estimate that a | | erty is excluded and administrative creditors? | | | | |
| 18. How many creditors do you estimate that you owe? | ✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999 | 1,000-5,000 5,001-10,00 10,001-25,0 | 0 | ☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than 100,000 | | | | |
| 19. How much do you estimate your assets to be worth? | \$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million | | | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion | | | | |
| 20. How much do you estimate your liabilities to be? | | | | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion | | | | |
| Part 7: Sign Below | I begin a symmin and their markitions are | | | information provided in two and | | | | |
| For you | correct. If I have chosen to file under Ch of title 11, United States Code. under Chapter 7. | napter 7, I am aware tha I understand the relief d I did not pay or agree ned and read the notice th the chapter of title 1 | at I may proceed, if eli available under each to pay someone who e required by 11 U.S. 1, United States Coo | de, specified in this petition. | | | | |
| | connection with a bankruptcy content both. 18 U.S.C. §§ 152, 1341, 1 /s/ Makeyla Calvin Signature of Debtor 1 | | up to \$250,000, or in | nprisonment for up to 20 years, or | | | | |
| | Executed on 2/15/2018 MM / DD | //YYYY | Executed on | MM / DD / YYYY | | | | |

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| Debtor 1 Makeyla | S. Calvin | | Case number (if | Case number (if known) | | |
|--|--|-------------------------|----------------------------|--|--|--|
| First Name | Middle Name | Last Name | <u> </u> | | | |
| For your attorney, if you are represented by one | I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) abeligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explorelief available under each chapter for which the person is eligible. I also certify that I have delivered | | | | | |
| If you are not | debtor(s) the notice requ | uired by 11 U.S.C. § 3 | 342(b) and, in a case in v | which § 707(b)(4)(D) applies, certify that I | | |
| represented by an | have no knowledge afte | r an inquiry that the i | nformation in the sched | lules filed with the petition is incorrect. | | |
| attorney, you do not | · · | , , | | • | | |
| need to file this page. | /s/ Morsheda Hash | em | Date | 2/15/2018 | | |
| | Signature of Attorney | **** | | M / DD / YYYY | | |
| | . 5 | | | | | |
| | | | | | | |
| | Morsheda Hashem | | | | | |
| | Printed name | | | | | |
| | Semrad Law Firm | | | | | |
| | Firm name | | | | | |
| | 11101 S. Western Ave | enue | | | | |
| | Street | | | | | |
| | | | | | | |
| | | | | | | |
| | Chicago | | Illinois | 60643 | | |
| | City | | State | Zip Code | | |
| | | | | | | |
| | Contact phone | 3122374973 | Email address | mhashem@semradlaw.com | | |
| | | | | | | |
| | | | | | | |
| | Bar number | | State | | | |

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| Fill in this information to identify your case: | | | | | | | | |
|---|---------------------------|-------------|----------------------|--|--|--|--|--|
| Debtor 1 | Makeyla | S. | Calvin | | | | | |
| | First Name | Middle Name | Last Name | | | | | |
| Debtor 2 | | | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | | | |
| Jnited States E | Sankruptcy Court for the: | Northern | District of Illinois | | | | | |
| | | | (State) | | | | | |
| Case number If known) | | | | | | | | |

| | Check if | this | is | an |
|---|----------|---------|----|----|
| _ | amende | d filir | ng | |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information 12/1

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

| Part 1: Summarize Your Assets | |
|--|---|
| | Your assets Value of what you own |
| . Schedule A/B: Property (Official Form 106A/B) | \$0.00 |
| 1a. Copy line 55, Total real estate, from Schedule A/B | <u>:</u> : |
| 1b. Copy line 62, Total personal property, from Schedule A/B | \$300.00 |
| 1c. Copy line 63, Total of all property on Schedule A/B | \$300.00 |
| art 2: Summarize Your Liabilities | |
| | Your liabilities Amount you owe |
| Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$0.00 |
| . Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) | \$0.00 |
| 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$30,735.00 |
| Your total liabilities | \$30,735.00 |
| Part 3: Summarize Your Income and Expenses | |
| | |
| . Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$2,213.23 |
| , , | |
| . Schedule J: Your Expenses (Official Form 106J) | |

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| Deb | tor 1 | Makeyla | S. | Calvin | Case number (if known) | | | | | | |
|---|--|---|---------------------------------------|---|---|------------|--|--|--|--|--|
| | | First Name | Middle Name | Last Name | | | | | | | |
| Part 4 | 4: | Answer These Question | ns for Administrat | tive and Statistical Recor | ds | | | | | | |
| 6. A i | re yo | ou filing for bankruptcy und | ler Chapters 7, 11, o | r 13? | | | | | | | |
| Г | No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. | | | | | | | | | | |
| | | es. | , , , , , , , , , , , , , , , , , , , | | | | | | | | |
| Ŀ | ✓ | | | | | | | | | | |
| 7. W | /hat | kind of debt do you have? | | | | | | | | | |
| Ī. | | | | | y an individual primarily for a personal, | | | | | | |
| _ | fa | amily, or household purpose. | 11 U.S.C. § 101(8). F | Fill out lines 8-10 for statistical p | purposes. 28 U.S.C. § 159. | | | | | | |
| | | our debts are not primarily nis form to the court with you | | ou have nothing to report on th | is part of the form. Check this box and sub | mit | | | | | |
| | | | | | | E | | | | | |
| | | 122A-1 Line 11; OR , Form | | ne: Copy your total current mon form 122C-1 Line 14. | thly income from Official | \$2,514.75 | | | | | |
| 9. | Сор | by the following special cat | egories of claims fro | om Part 4, line 6 of Schedule | E/F: | | | | | | |
| | Fro | m Part 4 on Schedule E/F, | copy the following: | Total claim | | | | | | | |
| | | ŕ | ., | | | | | | | | |
| | 9a. | Domestic support obligations | s (Copy line 6a.) | | \$0.00 | | | | | | |
| | 9b. | Taxes and certain other debt | s vou owe the govern | ment. (Copy line 6b.) | \$0.00 | | | | | | |
| | | | , | , , , | \$0.00 | | | | | | |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | | | | | | | | | | | |
| | 9d. | Student loans. (Copy line 6f. |) | | \$6,597.00 | | | | | | |
| | | Obligations arising out of a s rity claims. (Copy line 6g.) | eparation agreement c | or divorce that you did not report | st as \$0.00 | | | | | | |
| | | priority diamet. (Copy into og.) | | | \$0.00 | | | | | | |
| | 9f. [| Debts to pension or profit-shape | aring plans, and other | similar debts. (Copy line 6h.) | • • • • • | | | | | | |

\$6,597.00

9g. Total. Add lines 9a through 9f.

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| | | | | | 33 | | | | |
|---|--|--|--|--|--|--|---|---|--|
| Fill in this | information | to identify your c | ase: | | | | | | |
| Debtor 1 | Make | • | S. | | Calvin | | | | |
| Debtor 2 | FIRST | Name | Middle N | ame | Last Name | | | | |
| (Spouse, if fi | ling) First | Name | Middle N | ame | Last Name | | | | |
| United Sta | ates Bankrup | otcy Court for the: | Northern | | District of Illinois (State) | | | | |
| Case num (If known) | nber | | | | , , | | | | |
| Officia | al Form | 106A/B | | | | | | Check if this is an amended filing | |
| Sche | dule A | /B: Prope | rty | | | | | 12/1 | |
| category v responsibl write your Part 1: | where you t le for supply name and Describe | hink it fits best. I ying correct infor case number (if k Each Residenc | Be as complete ar mation. If more sp mown). Answer ev ee, Building, Lar | nd accu pace is very que nd, or C | rate as possible. If two needed, attach a sepa estion. Other Real Estate Yo | married people a rate sheet to this t ou Own or Have | | are equally | |
| 1. Do you | No. Go to l | | juitable interest i | n any re | esidence, building, land | ı, or sımılar propei | ту? | | |
| | Yes. Where | is the property? | | | | | | | |
| 1.1 | Street addre | ess, if available, or | other description | Sin Du Co | s the property? Check a gle-family home plex or multi-unit buildin ndominium or cooperati | g ve | the amount of any secu | claims or exemptions. Put ared claims on <i>Schedule D:</i> nims Secured by Property. Current value of the portion you own? | |
| | | | | Lai | nufactured or mobile ho | me | | | |
| | Number Street | | | | restment property | | Describe the nature of | | |
| | City | State | Zip Code | Timeshare Other | | | interest (such as fee simple, tenancy by the entireties, or a life estate), if known. | | |
| | ŕ | | · | one. De De De | as an interest in the property of the property | , | Check if this is co (see instructions) | ommunity property | |
| | | | | U Other | information you wish to | o add about this it | em, such as local | | |
| | | | | proper | ty identification numb | er <u>:</u> | | | |
| 1.2 | | e more than one, li | | Sin Du Co | s the property? Check and gle-family home plex or multi-unit buildin and ominium or cooperation undactured or mobile ho | g ve | the amount of any secu | claims or exemptions. Put ared claims on <i>Schedule D: hims Secured by Property.</i> Current value of the portion you own? | |
| | Number | Street | | Lai | | | Describe the nature o | f vour ownership | |
| | | | | Tin | restment property neshare | | interest (such as fee s the entireties, or a life | simple, tenancy by | |
| | City | State | Zip Code | Who hone. De De At Other | as an interest in the problem of the problem of the problem of the problem of the debtors of the | and another o add about this it | Check if this is co (see instructions) | ommunity property | |

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| Debtor 1 | | S. | Calvin | Case numbe | r (if known) | |
|---|--|--|---|----------------------|--|--|
| | First Name | Middle Name | Last Name | | | |
| Nur | et address, if available, or ot | her description | What is the property? Check all that a Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare | apply. | the amount of any secu | imple, tenancy by |
| City | State | | Who has an interest in the property Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and and Other information you wish to add a | other | Check if this is co (see instructions) | |
| 2. Add | the dollar value of the po | | all of your entries from Part 1, inclu | ding any entrie | s for pages | |
| | ve attached for Part 1. W | - | - | 3. 7 | | |
| | | | > | | | |
| Do you ov you own t 3. Cars, va ✓ No | hat someone else drives. If the strucks, tractors, sport units, trucks, tractors, trucks, t | equitable interes you lease a vehicle, | t in any vehicles, whether they are also report it on Schedule G: Executor rcycles | - | - | |
| Ye | | | Who has an interest in the man | o a mito of Ohana la | De set deduct cossed | alainea au acceptatione Dut |
| 3.1 | Make Model: Year: | | Who has an interest in the propone. Debtor 1 only | erty? Check | the amount of any secu | claims or exemptions. Put ured claims on <i>Schedule D:</i> aims <i>Secured by Property.</i> |
| | Approximate mileage: Other information: | | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors an | d another | Current value of the entire property? | Current value of the portion you own? |
| | | | Check if this is community instructions) | property (see | | |
| 3.2 | Make Model: Year: | | Who has an interest in the propone. Debtor 1 only | perty? Check | the amount of any secu | claims or exemptions. Put ured claims on <i>Schedule D:</i> aims Secured by Property. |
| | Approximate mileage: Other information: | | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors an Check if this is community | | Current value of the entire property? | Current value of the portion you own? |
| | | | instructions) | | | |

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| | Makeyla First Name | S. Middle Name | Calvin Last Name | Case number | er (if known) | |
|------|---|-------------------|--|---|---|---|
| 3.3 | Make Model: Year: Approximate mileage: Other information: | | Who has an interest in the one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 or At least one of the debtor Check if this is communication. | nly is and another | the amount of any secu | claims or exemptions. Pured claims on Schedule Is it is secured by Property. Current value of the portion you own? |
| 3.4 | Make Model: Year: Approximate mileage: | <u> </u> | instructions) Who has an interest in the one. Debtor 1 only Debtor 2 only | | the amount of any secu | claims or exemptions. Pured claims on Schedule Laims Secured by Property. Current value of the portion you own? |
| | Other information: | | Debtor 1 and Debtor 2 or At least one of the debtor Check if this is communinstructions) | s and another | | |
| Wat | | | | | | |
| Exar | No Yes | | fishing vessels, snowmobiles, in the one. | motorcycle accessori | Do not deduct secured the amount of any secu | red claims on Schedule |
| Exar | nples: Boats, trailers, motor No Yes Make | | Who has an interest in the one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 or At least one of the debtor Check if this is communication. | motorcycle accessori property? Check hly is and another | Do not deduct secured the amount of any secu | red claims on Schedule |
| 4.1 | nples: Boats, trailers, motor No Yes Make Model: Year: Approximate mileage: | | Who has an interest in the one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 or At least one of the debtor | property? Check hly s and another hity property (see property? Check | Do not deduct secured the amount of any secu Creditors Who Have Clas Current value of the entire property? Do not deduct secured the amount of any secu | |

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Calvin Debtor 1 Makeyla Case number (if known) Middle Name First Name Last Name Part 3: **Describe Your Personal and Household Items** Current value of the Do you own or have any legal or equitable interest in any of the following items? portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware Yes. Describe... Misc. Household Goods \$50.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music Yes. Describe... Cell phone \$100.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections, other collections, memorabilia, collectibles Yes. Describe... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No Yes. Describe... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment Yes. Describe... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Yes. Describe... **Used Clothing** \$150.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe... 13. Non-farm animals Examples: Dogs, cats, birds, horses Yes. Describe... 14. Any other personal and household items you did not already list, including any health aids you did not list No Yes. Describe... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$300.00 for Part 3. Write that number here

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Debtor 1 Makeyla Calvin Case number (if known) Middle Name First Name Last Name Part 4: **Describe Your Financial Assets** Current value of the Do you own or have any legal or equitable interest in any of the following? portion you own? Do not deduct secured claims or exemptions. 16. **Cash** Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition **✓** No Yes Cash: 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. Institution name: 17.1. Checking account: 17.2. Checking account: 17.3. Savings account: 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts **✓** No Institution or issuer name: Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture **✓** No % of ownership: Name of entity Yes. Give specific information about

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| Deb | tor 1 Makeyla First Name | S. Middle Name | Calvin Last Name | Case number (if known) | |
|-----|--|---|----------------------------|---|--|
| 20. | Negotiable instruments Non-negotiable instrume No No Yes. Give specific | orate bonds and other negotial include personal checks, cashiers' ents are those you cannot transfe | checks, promissory no | otes, and money orders. | |
| | information about them | Issuer name: | | | |
| 21. | | | , thrift savings account | s, or other pension or profit-sharing plans | |
| | ✓ No Yes. List each account | Type of account: 401(k) or similar plan: | Institution name: | | |
| | separately. | Pension plan: | | | |
| | | IRA: | | | |
| | | Retirement account: | | | |
| | | Keogh: | | | |
| | | Additional account: | | | |
| | | Additional account: | | | |
| 22. | | prepayments I deposits you have made so that with landlords, prepaid rent, public | | | |
| | ✓ No | | Institution name: | | |
| | Yes | Electric: | | | |
| | | Gas: | | | |
| | | Heating oil: | | | |
| | | Security deposit on rental unit: | | | |
| | | Prepaid rent: | | | |
| | | Telephone: | | | |
| | | Water: | - | | |
| | | Rented furniture: Other: | | | |
| 23 | Annuities (A contract fo | or a periodic payment of money to | you either for life or fo | ur a number of vears) | |
| 23. | ✓ No Yes | Issuer name and description: | you, etiler for life of to | i a number of years) | |
| | | | | | |
| | | | | | |

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| Debte | or 1 Makeyla First Name | S. Middle N | Calvir Iame Last N | | |
|-------|---|---|-------------------------------|---|--|
| 24. | | | | Eprogram, or under a qualified state tuition p | program. |
| | | 0(b)(1), 529A(b), and 529(| | , | |
| | ✓ No | stitution name and descrip | ition. Separately file the re | cords of any interests.11 U.S.C. § 521(c): | |
| | Yes | stitution name and descrip | nion. Deparately life the re- | ords of any interests. IT 0.0.0. § 32 f(b). | |
| | _ | | | | |
| | _ | | | | |
| ٥٢ | | 6 | | shine liebed in line d) and rimbbe an account | |
| 25. | exercisable for | - | roperty (other than any | thing listed in line 1), and rights or powers | |
| | ✓ No | | | | |
| | Yes. Describ | e | | | |
| | | | | | |
| 26. | | ghts, trademarks, trade | | | |
| | | et domain names, website | s, proceeds from royaliles | and licensing agreements | |
| | ✓ No Yes. Describ | e | | | |
| | L rear Describ | | | | |
| 27. | Licenses franc | hises, and other general | intangibles | | |
| 21. | | _ | _ | on holdings, liquor licenses, professional licenses | |
| | ✓ No | | | | |
| | Yes. Describ | e | | | |
| | | | | | |
| | | | | | |
| Mon | ey or property | owed to you? | | | Current value of the |
| Mon | ey or property | owed to you? | | | portion you own? |
| Mon | ey or property | owed to you? | | | |
| | ey or property | · | | | <pre>portion you own? Do not deduct secured</pre> |
| | Tax refunds owe | d to you | | | portion you own? Do not deduct secured claims or exemptions. |
| | Tax refunds owe No Yes. Give spe | · | | Federal: | <pre>portion you own? Do not deduct secured</pre> |
| | Tax refunds owe No Yes. Give speabout till you alre | d to you acific information nem, including whether hady filed the returns | | Federal: State: | portion you own? Do not deduct secured claims or exemptions. |
| | Tax refunds owe No Yes. Give speabout till you alre | d to you ecific information nem, including whether | | | portion you own? Do not deduct secured claims or exemptions. |
| 28. | Tax refunds owe No Yes. Give speabout the you alreand the | d to you ecific information nem, including whether leady filed the returns tax years | pousal support, child sup | State: Local: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds owe No Yes. Give speabout the you alreand the Family support Examples: Past do | d to you ecific information nem, including whether leady filed the returns tax years | pousal support, child sup | State: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds owe No Yes. Give speabout till you alreand the Family support Examples: Past de | d to you ceific information nem, including whether lady filed the returns tax years | pousal support, child sup | State: Local: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds owe No Yes. Give speabout till you alreand the Family support Examples: Past de | d to you ecific information nem, including whether leady filed the returns tax years | pousal support, child sup | State: Local: port, maintenance, divorce settlement, property | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds owe No Yes. Give speabout till you alreand the Family support Examples: Past de | d to you ceific information nem, including whether lady filed the returns tax years | pousal support, child sup | State: Local: port, maintenance, divorce settlement, property Alimony: Maintenance | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 settlement \$0.00 : \$0.00 |
| 28. | Tax refunds owe No Yes. Give speabout till you alreand the Family support Examples: Past de | d to you ceific information nem, including whether lady filed the returns tax years | pousal support, child sup | State: Local: port, maintenance, divorce settlement, property Alimony: Maintenance Support: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 settlement \$0.00 \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds owe No Yes. Give speabout till you alreand the Family support Examples: Past de | d to you ceific information nem, including whether lady filed the returns tax years | pousal support, child sup | State: Local: port, maintenance, divorce settlement, property Alimony: Maintenance Support: Divorce settle | ## solution ## sol |
| 28. | Tax refunds owe ✓ No Yes. Give speabout the your alread the grand the gra | d to you ecific information nem, including whether lady filed the returns tax years | pousal support, child sup | State: Local: port, maintenance, divorce settlement, property Alimony: Maintenance Support: | ## solution ## sol |
| 29. | Tax refunds owe ✓ No Yes. Give speabout the you alread the you | d to you secific information nem, including whether sady filed the returns tax years ue or lump sum alimony, secific information | e payments, disability ber | State: Local: port, maintenance, divorce settlement, property Alimony: Maintenance Support: Divorce settle Property sett | ### sportion you own? |
| 29. | Tax refunds owe No Yes. Give speabout the you alread the samples: Past do No Yes. Give speach of the samples: Past do No Yes. Give speach of the samples: Unpaid Social | d to you ceific information nem, including whether lady filed the returns tax years | e payments, disability ber | State: Local: port, maintenance, divorce settlement, property Alimony: Maintenance Support: Divorce settle Property sett | ### sportion you own? |
| 29. | Tax refunds owe ✓ No Yes. Give speabout the you alread the you | d to you secific information nem, including whether sady filed the returns tax years ue or lump sum alimony, secific information someone owes you I wages, disability insurance Security benefits; unpaid to | e payments, disability ber | State: Local: port, maintenance, divorce settlement, property Alimony: Maintenance Support: Divorce settle Property sett | ### sportion you own? |
| 29. | Tax refunds owe ✓ No Yes. Give speabout the you alread the you alread the grand the | d to you secific information nem, including whether sady filed the returns tax years ue or lump sum alimony, secific information someone owes you I wages, disability insurance Security benefits; unpaid to | e payments, disability ber | State: Local: port, maintenance, divorce settlement, property Alimony: Maintenance Support: Divorce settle Property sett | ### sportion you own? |

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| Debt | tor 1 Makeyla | S. | Calvin | Case number (if known) | |
|------|---|---|--------------------------------|--|--|
| | First Name | Middle Name | Last Name | | |
| 31. | Interests in insurance paramples: Health, disability | | vings account (HSA); credit, I | nomeowner's, or renter's insurance | |
| | Yes. Name the insura of each policy and list | ance company | pany name: | Beneficiary: | Surrender or refund value |
| 32. | | | | y, or are currently entitled to receive | |
| | Yes. Describe | | | | |
| 33. | | rties, whether or not you h ployment disputes, insurance | | a demand for payment | |
| 34. | Other contingent and uto set off claims No Yes. Describe | Inliquidated claims of every | nature, including counter | claims of the debtor and rights | 7 |
| 35. | Any financial assets you No Yes. Describe | u did not already list | | | |
| 36. | | all of your entries from Par | | or pages you have attached | |
| Part | _ | | | nterest In. List any real estate in Pa | art 1. |
| 37. | Do you own or have any | / legal or equitable interest | in any business-related p | operty? | |
| | No. Go to Part 6. Yes. Go to line 38. | | | | Current value of the portion you own? Do not deduct secured claims or exemptions |
| 38. | Accounts receivable or | commissions you already e | earned | | |
| | ✓ No Yes. Describe | | | | |
| 39. | Office equipment, furni Examples: Business-relat | | ems, printers, copiers, fax m | achines, rugs, telephones, desks, chairs, el | ectronic devices |
| | ✓ No Yes. Describe | | | | |

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| Deb | tor 1 Makeyla | S. | Calvin | Case number (if known) | |
|----------|-------------------------|--------------------------------------|---|-----------------------------------|---------------------------------------|
| 1.0 | First Name | Middle Name | Last Name | | |
| 40. | machinery, fixtures, e | equipment, supplies you | use in business, and tools of y | our trade | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| | | | | | |
| 11 | Inventory | | | | |
| 41. | Inventory | | | | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| | | | | | |
| 42 | Interests in partnersh | nins or joint ventures | | | |
| | | inpo or joint vontaroo | | | |
| | | | Name of entity: | % of ownership: | |
| | Yes. Give specific | | • | · | |
| | information about them | | | | |
| | | | | | |
| | | | | | |
| 43 | Customer lists, mailing | lists, or other compilat | ions | | |
| | | ,, | | | |
| | No No | and the decrease of the Calcor PC of | tele telescociates a fee all the selections | 11.0.0.0.404/44.6\\0 | |
| | Yes. Do your lists i | nciude personally identifia | ble information (as defined in 11 | U.S.C. § 101(41A))? | |
| | No | | | | |
| | Yes. Desc | ribe | | | |
| | | | | | |
| 44. | Any business-related | property you did not all | eady list | | |
| | ✓ No | | | | |
| | Yes. Give specific | | | | |
| | information | | | | <u> </u> |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | <u> </u> |
| | | | | | |
| | | | | | |
| 45 A | dd tho dollar value of | all of your antrine from [| Part 5 including any entries for | r nagos vou have attached | |
| | | | art 5, including any entries for | | |
| <u> </u> | | | | | |
| Part | | | | y You Own or Have an Interest In. | |
| | | n interest in farmland, list it | | | |
| 46. | Do you own or have a | ny legal or equitable in | terest in any farm- or commerc | cial fishing-related property? | |
| | No. Go to Part 7. | | | | Current value of the portion you own? |
| | Yes. Go to line 47. | | | | Do not deduct secured claims |
| | | | | | or exemptions |
| 47. | Farm animals | | | | |
| | Examples: Livestock, p | oultry, farm-raised fish | | | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| | | | | | |
| | | | | | |

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| Debt | tor 1 | Makeyla First Name | S. Middle Name | Calvin Last Name | Case numb | Der (if known) | |
|--------------|----------|--------------------------------|---|-------------------------|-----------------|-------------------------|------------|
| 48. | Cro | ps-either growing | or harvested | | | | |
| | ✓ | No Yes. Describe | | | | | |
| 49. | Far | m and fishing equi | pment, implements, machinery, fixt | ures, and tools of trad | e | | |
| | ✓ | No | | | | | |
| | | Yes. Describe | | | | | |
| 50. | Far | m and fishing supp | lies, chemicals, and feed | | | | |
| | ✓ | No | | | | | |
| | | Yes. Describe | | | | | |
| 51. | Any | y farm- and comme | rcial fishing-related property you d | id not already list | | | |
| | ✓ | No | | | | | |
| | | Yes. Describe | | | | | |
| E0 4 | alal 1. | an dollow volve etc | Il of your ontrine from Bart C in the | ling ony outside for | oo vor bor'' | a shad | |
| | | | II of your entries from Part 6, includer here | | es you nave att | acned | |
| | | | | | | | |
| | | | | | | | |
| Part | | | pperty You Own or Have an Inte | | d Not List Abo | ve | |
| 53. | | | perty of any kind you did not alread is, country club membership | y list? | | | |
| | ✓ | No | | | | | |
| | | Yes. Give specific information | | | | | |
| | | | | | | | |
| | | | | | | | |
| 54. A | dd ti | ne dollar value of a | II of your entries from Part 7. Write | that number here | | | • |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| Part | 8: | List the Totals o | f Each Part of this Form | | | | |
| 55. I | Part | 1: Total real estate | e, line 2 | | | > | |
| 56. | oart | 2 total vehicles, lir | ne 5 | | | | |
| 57. P | art (| 3: Total personal a | nd household items, line 15 | \$300.00 | | | |
| 58. P | art 4 | 4: Total financial a | ssets, line 36 | | | | |
| 59. I | Part | 5: Total business-r | elated property, line 45 | | | | |
| 60. I | Part | 6: Total farm- and | fishing-related property, line 52 | | | | |
| 61. I | Part | 7: Total other prop | erty not listed, line 54 | | | | |
| 62. | Γota | personal property | Add lines 56 through 61. | \$300.00 | _ | nomanal processes and b | + \$300.00 |
| | | | | | Сору | personal property total | |
| 63. T | otal | of all property on S | Schedule A/B. Add line 55 + line 62 | | | | \$300.00 |

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|---|--|---|--|
| mation to identify your | case: | | |
| Makeyla | S. | Calvin | |
| First Name | Middle Name | Last Name | |
| First Name | Middle Name | Last Name | |
| sankruptcy Court for the | : Northern | District of Illinois (State) | |
| _ | | | |
| Form 106C | | | Check if this is an amended filing |
| e C: The Pro | perty You Claim | n as Exempt | 04/16 |
| Jsing the property y more space is neede | ou listed on <i>Schedule A</i> ed, fill out and attach to t | <i>/B: Property</i> (Official Fo | rm 106A/B) as your source, list the property that you claim |
| fic dollar amount a of any applicable sta etirement funds—r that limits the exem | s exempt. Alternatively, atutory limit. Some exe nay be unlimited in doll aption to a particular do | you may claim the ful mptions—such as tho ar amount. However, llar amount and the va | I fair market value of the property being exempted up to se for health aids, rights to receive certain benefits, and f you claim an exemption of 100% of fair market value |
| | Makeyla First Name First Name Bankruptcy Court for the Bankruptcy Court | mation to identify your case: Makeyla First Name Middle Name First Name Middle Name Bankruptcy Court for the: Northern Form 106C The Property You Claim te and accurate as possible. If two married possible and accurate as possible and attach to to the space is needed, fill out and attach to to the space is needed, fill out and attach to to the space is needed, fill out and attach to the space is needed, fill | mation to identify your case: Makeyla S. Calvin First Name Middle Name Last Name First Name Middle Name Last Name Bankruptcy Court for the: Northern District of Illinois (State) |

| Par | identify the Property You Claim | i as Exempl | | | | | | |
|-----|--|----------------------------------|---|------------------------------------|--|--|--|--|
| 1. | Which set of exemptions are you claiming | ng? Check one only, ev | ven if your spouse is filing with you. | | | | | |
| | ✓ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) | | | | | | | |
| | You are claiming federal exemptions | s. 11 U.S.C. § 522(b)(| 2) | | | | | |
| 2. | For any property you list on Schedule A/ | B that you claim as e | exempt, fill in the information below. | | | | | |
| | Brief description of the property and line on Schedule A/B that lists this | Current value of | Amount of the exemption you claim | Specific laws that allow exemption | | | | |
| | property | the portion you own | Check only one box for each exemption. | | | | | |
| | | Copy the value from Schedule A/B | | | | | | |
| | Brief | | | 735 ILCS 5/12-1001(b) | | | | |
| | description: | \$100.00 | \$100.00 | | | | | |
| | Cell phone | | 100% of fair market value, up to any | - | | | | |
| | Line from Schedule A/B: 07 | | applicable statutory limit | | | | | |
| | Brief | | | 735 ILCS 5/12-1001(a) | | | | |
| | description: | \$150.00 | \$150.00 | | | | | |
| | Used Clothing | | 100% of fair market value, up to any | - | | | | |
| | Line from Schedule A/B: 11 | | applicable statutory limit | | | | | |
| 3. | Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and even | ry 3 years after that for | 375? cases filed on or after the date of adjustment.) vithin 1,215 days before you filed this case? | | | | | |

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| De | btor 1 Makeyla S. First Name Mid | ddle Name | Calvin Last Name | Case number (if known) | |
|----|--|--|---|--|------------------------------------|
| Pa | rt 2: Additional Page Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own Copy the value from Schedule AVB | Amount of the exempt Check only one box for | • | Specific laws that allow exemption |
| | Brief description: Misc. Household Goods Line from Schedule A/B: 06 | \$50.00 | | \$50.00 et value, up to any ry limit | 735 ILCS 5/12-1001(b) |

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| | | | | • | | | |
|------------------|---------------|-------------------------------|----------------------------|--|---|---|--------------------------------------|
| Fill in | this inforr | mation to identify your ca | ase: | | | | |
| Debto | or 1 | Makeyla | S. | Calvin | | | |
| | | First Name | Middle Name | Last Name | | | |
| Debto | or 2 | | | | | | |
| (Spous | e, if filing) | First Name | Middle Name | Last Name | | | |
| United | d States B | ankruptcy Court for the: | Northern | District of Illinois | | | |
| _ | | | | (State) | | | |
| Case (If know | number | | | | | | |
| ` | | | | | | | Shook if this is on |
| Offi | icial I | Form 106D | | | | | Check if this is an mended filing |
| Scl | nedu | le D: Credit | ors Who Ha | ve Claims Secure | ed by Prop | erty | 12/15 |
| more s | space is r | - | | e are filing together, both are equ nber the entries, and attach it to t | • • | | |
| 1. | Oo any c | reditors have claims s | ecured by your proper | ty? | | | |
| Į. | ✓ No. C | heck this box and subr | mit this form to the court | with your other schedules. You hav | e nothing else to repo | rt on this form. | |
| Ī | Yes. I | Fill in all of the informatio | n below. | | | | |
| Part ' | 1: List / | All Secured Claims | | | | | |
| f | or each cla | aim. If more than one cre | | red claim, list the creditor separately list the other creditors in Part 2. As g to the creditor's name. | Column A Amount of claim Do not deduct the value of collateral. | Column B Value of collateral that supports this claim | Column C Unsecured portion If any |

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| Fill in | n this infor | mation to identify your o | ase: | | | |
|------------------------|---|---|---|---|---|--|
| Debt | tor 1 | Makeyla | S. | Calvin | | |
| | | First Name | Middle Name | Last Name | | |
| Debt | tor 2 use, if filing) | First Name | Middle Name | Last Name | | |
| (0000 | 200, II IIII 19) | i list Name | whate name | Last Name | | |
| Unite | ed States E | Bankruptcy Court for the: | Northern | District of Illinois | | |
| Case | e number | | | (State) | | |
| (If kno | wn) | | | | | |
| Off | icial F | orm 106E/F | | | | Check if this is an amended filing |
| | | | al:4 a a \A/la a | Have Head | al Ola!a | |
| <u> 5c</u> | neau | lie E/F: Gre | eaitors wno | Have Unsec | urea Ciaims | 12/1: |
| other Form claim | r party to a 106A/B) a ns that are ntries in t | any executory contract and on Schedule G: Exe e listed in Schedule D: (| s or unexpired leases tha ecutory Contracts and Un Creditors Who Hold Claim | t could result in a claim. Al expired Leases (Official For is Secured by Property. If m | so list executory contracts m 106G). Do not include an ore space is needed, copy t | n NONPRIORITY claims. List the on Schedule A/B: Property (Official ny creditors with partially secured the Part you need, fill it out, number rite your name and case number (if |
| Part | 1: List | All of Your PRIORIT | Y Unsecured Claims | | | |
| 1. | Do any c | reditors have priority ur | nsecured claims against | you? | | |
| | ✓ No. (| Go to Part 2. | | | | |
| | Yes. | | | | | |
| 2. | listed, idea As much | ntify what type of claim it as possible, list the claims | is. If a claim has both prior in alphabetical order acco | ity and nonpriority amounts, li | st that claim here and show be found to the state of the | arately for each claim. For each claim both priority and nonpriority amounts. ority unsecured claims, fill out the |

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

Total

claim

Priority

amount

Nonpriority

amount

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Calvin Debtor 1 Makeyla Case number (if known) Middle Name First Name Last Name Part 2: List All of Your NONPRIORITY Unsecured Claims Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. **✓** Yes. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than four priority unsecured claims fill out the Continuation Page of Part 2. **Total claim** 4.1 Advocate Christ Hospital \$500.00 Last 4 digits of account number Nonpriority Creditor's Name 4440 95th Street When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60453 Illinois Oak Lawn City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Medical Bill Other. Specify ___ Is the claim subject to offset? Yes **AFSACCEPTANC** 4.2 \$0.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 7/2012 1475 W Cyprus Creek Rd Number As of the date you file, the claim is: Check all that apply. Contingent Fort Lauderdale Florida 33309 Unliquidated City State Zip Code Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify ____ 66 Automobile Is the claim subject to offset? **✓** No Yes ALLIED INT \$170.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 12/2016 701 Western Ave. Number Street As of the date you file, the claim is: Check all that apply. Contingent 91201 Glendale California Unliquidated Zip Code City State Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Collection; Collecting for Is the claim subject to offset? **✓** ORIGINAL CREDITOR: 12 No Other. Specify _ PUBLIC STORAGE Yes

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 Debtor 1 First Name
 S.
 Calvin
 Case number (if known)

 Last Name
 Middle Name
 Last Name

| Part 2 | Your NONPRIORITY Unsecured Claims - Continuation | n Page | | | | |
|--------|---|--|-------------|--|--|--|
| | After listing any entries on this page, number them beginning wi | ith 4.5, followed by 4.6, and so forth. | Total claim | | | |
| 4.4 | City of Chicago - Parking and red Light Tickets | - Last 4 digits of account number | \$5,000.00 | | | |
| | Nonpriority Creditor's Name Department of Revenue - PO Box 88292 | When was the debt incurred? n/a | | | | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | | | | |
| | | - Contingent | | | | |
| | Chicago Illinois 60680 | Unliquidated | | | | |
| | City State Zip Code | Disputed | | | | |
| | Who incurred the debt? Check one. Debtor 1 only | Type of NONPRIORITY unsecured claim: | | | | |
| | Debtor 2 only | Student loans | | | | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | | |
| | At least one of the debtors and another | Debts to pension or profit-sharing plans, and other similar debts | | | | |
| | Check if this claim relates to a community debt | Other. Specify Parking and Red Light Tickets | | | | |
| | Is the claim subject to offset? | | | | | |
| | <u>✓</u> No | | | | | |
| | Yes | | | | | |
| 4.5 | ComEd Nonpriority Creditor's Name | - Last 4 digits of account number | \$1,800.00 | | | |
| | 3 Lincoln Center | When was the debt incurred?n/a | | | | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | | | | |
| | Bankruptcy Section | - Contingent | | | | |
| | Oakbrook Terrace Illinois 60181 | Unliquidated | | | | |
| | City State Zip Code | Disputed | | | | |
| | Who incurred the debt? Check one. Debtor 1 only | Type of NONPRIORITY unsecured claim: | | | | |
| | Debtor 2 only | Student loans | | | | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | | |
| | At least one of the debtors and another | Debts to pension or profit-sharing plans, and other similar debts | | | | |
| | Check if this claim relates to a community debt | Other. Specify Electric Bill | | | | |
| | Is the claim subject to offset? | | | | | |
| | <u>✓</u> No | | | | | |
| | Yes | | | | | |
| 4.6 | DEPT OF ED/NAVIENT | - Last 4 digits of account number0623 | \$4,342.00 | | | |
| | Nonpriority Creditor's Name PO BOX 9635 | When was the debt incurred? 6/2010 | | | | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | | | | |
| | | Contingent | | | | |
| | WILKES BARRE Pennsylvania 18773 City State Zip Code | - Unliquidated | | | | |
| | Who incurred the debt? Check one. | Disputed | | | | |
| | Debtor 1 only | Type of NONPRIORITY unsecured claim: Student loans | | | | |
| | Debtor 2 only | | | | | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar | | | | |
| | At least one of the debtors and another | | | | | |
| | Check if this claim relates to a community debt | debts | | | | |
| | Is the claim subject to offset? | Other. Specify | | | | |
| | ✓ No ✓ Yes | | | | | |

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Debtor 1 Makeyla S. Calvin Case number (if known)
First Name Middle Name Last Name

| Part : | 2: Your NONPRIORITY Unsecured Claims - Continuation | n Page | | | |
|--------|--|---|-------------|--|--|
| | After listing any entries on this page, number them beginning wi | ith 4.5, followed by 4.6, and so forth. | Total claim | | |
| 4.7 | DEPT OF ED/NAVIENT Nonpriority Creditor's Name PO BOX 9635 Number Street | - Last 4 digits of account number 0623 When was the debt incurred? 6/2010 As of the date you file, the claim is: Check all that apply. | \$2,255.00 | | |
| | WILKES BARRE Pennsylvania 18773 City State Zip Code Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? ✓ No Yes | Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify | | | |
| 4.8 | ENHANCED RECOVERY CO L Nonpriority Creditor's Name 8014 BAYBERRY RD Number Street JACKSONVILLE Florida 32256 City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? No Yes | When was the debt incurred? When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts 001 Collection; Collecting for ORIGINAL CREDITOR: COMCAST Other. Specify CABLE COMMUNICATIONS | \$924.00 | | |
| 4.9 | FIRST INVST SVC/FIRST Nonpriority Creditor's Name 5757 WOODWAY DR STE 400 Number Street HOUSTON Texas 77057 City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? No Yes | Last 4 digits of account number 0001 When was the debt incurred? 8/2013 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify 073 Automobile | \$0.00 | | |

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Calvin Debtor 1 Makeyla S Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.10 \$0.00 Last 4 digits of account number Nonpriority Creditor's Name 6340 SECURITY BLVD SUITE 200 When was the debt incurred? 7/2012 Number Street As of the date you file, the claim is: Check all that apply. Contingent **BALTIMORE** Maryland 21207 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify ___ 72 Automobile Is the claim subject to offset? **✓** No Yes 4.11 JH PORTFOLIO DEBT EQUI \$556.00 Last 4 digits of account number 3429 Nonpriority Creditor's Name 5757 PHÁNTOM DR STE 225 When was the debt incurred? 1/2017 Number Street As of the date you file, the claim is: Check all that apply. Contingent HAZELWOOD Missouri 63042 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify ____ 001 UnknownLoanType Is the claim subject to offset? **✓** No Yes JH PORTFOLIO DEBT EQUI 4.12 \$524.00 Last 4 digits of account number Nonpriority Creditor's Name 5757 PHANTOM DR STE 225 When was the debt incurred? 2/2017 Number Street As of the date you file, the claim is: Check all that apply. Contingent HAZELWOOD 63042 Missouri Unliquidated City Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts

No Yes

Is the claim subject to offset?

Other. Specify

001 UnknownLoanType

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Calvin Debtor 1 Makeyla S Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.13 MIDLAND FUNDING \$560.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 10/2016 2365 Northside Drive Number As of the date you file, the claim is: Check all that apply. Contingent San Diego California 92108 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify ____ 001 UnknownLoanType Is the claim subject to offset? **✓** No Yes 4.14 PENN CREDIT \$200.00 Last 4 digits of account number 2018 Nonpriority Creditor's Name When was the debt incurred? 10/2013 Po Box 988 Number Street As of the date you file, the claim is: Check all that apply. Contingent 17108 Harrisburg Pennsylvania Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Collection; Collecting for Is the claim subject to offset? **✓** ORIGINAL CREDITOR: 01 **✓** No VILLAGE OF SOUTH HOLLAND Other. Specify Yes PEOPLES ENGY 4.15 \$900.00 Last 4 digits of account number _ Nonpriority Creditor's Name 200 EAST RANDOLPH When was the debt incurred? 2/2009 Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated CHICAGO Illinois 60601 City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another debts Check if this claim relates to a community debt Other. Specify _ Gas Bill

✓ No Yes

Is the claim subject to offset?

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Calvin Debtor 1 Makeyla S Case number (if known) Middle Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.16 Premier bank Card/Charter \$0.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? PO Box 2208 Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 95696 Vacaville California City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another Check if this claim relates to a community debt Other. Specify ___ Notice Only Is the claim subject to offset? **✓** No Yes PRESTIGE FINANCIAL SVC \$11,477.00 4.17 3327 Last 4 digits of account number ___ Nonpriority Creditor's Name When was the debt incurred? 12/2014 1420 S 500 W Number As of the date you file, the claim is: Check all that apply. Contingent SALT LAKE CITY 84115 Utah Unliquidated City State Zip Code Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify _ 063 Automobile Is the claim subject to offset? **✓** No Yes SECURITY CREDIT SERVIC 4.18 \$1,227.00 9385 Last 4 digits of account number Nonpriority Creditor's Name 2653 W OXFORD LOOP When was the debt incurred? 6/2016 Number Street As of the date you file, the claim is: Check all that apply. Contingent 38655 OXFORD Mississippi Unliquidated City State Zip Code Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt 001 Collection; Collecting for Is the claim subject to offset? ORIGINAL CREDITOR: TEMPOE **✓** No

Yes

Other. Specify

LLC

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| Debtor | 1 Makeyla | S. | Calvin | Case number (if known) | | | | | |
|---------------------|--|------------------------|-------------------|--|-------------|--|--|--|--|
| | First Name | Middle Name | Last Name | · | | | | | |
| Part 2: | Your NONPRIORITY | Unsecured Claims | - Continuation F | Page | | | | | |
| | After listing any entries or | n this page, number th | em beginning witl | n 4.5, followed by 4.6, and so forth. | Total claim | | | | |
| 4.19 | Village of Hazel Crest | | | — Last 4 digits of account number — | | | | | |
| | Nonpriority Creditor's Name 3000 West 170TH Place | | | When was the debt incurred? | | | | | |
| | Number Street | | | As of the date you file, the claim is: Check all that apply. Contingent | | | | | |
| | Hazel Crest I | Ilinois 60 | 429 | Unliquidated | | | | | |
| City State Zip Code | | | Code | Disputed | | | | | |
| | Who incurred the debt? Cl | heck one. | | Type of NONPRIORITY unsecured claim: | | | | | |
| | Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | | | Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | | | |
| | | | | | | | | | |
| | At least one of the debto | ors and another | | Debts to pension or profit-sharing plans, and other similar debts | | | | | |
| | Check if this claim relates to a community debt | | | Other. Specify Red Light Tickets | | | | | |
| | Is the claim subject to offs | set? | | | | | | | |
| | ✓ No | | | | | | | | |
| | Yes | | | | | | | | |

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Debtor 1 Makeyla Calvin Case number (if known) Middle Name First Name Last Name Part 3: List Others to Be Notified About a Debt That You Already Listed Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Comcast On which entry in Part 1 or Part 2 did you list the original creditor? Name of (Check 11621 E. Marginal Way # 5 Line 4.8 Part 1: Creditors with Priority Unsecured Claims one): Number Street Part 2: Creditors with Nonpriority Unsecured Seattle Washington 98168 Last 4 digits of account number 3572 City State Zip Code HARRIS & HARRIS LTD On which entry in Part 1 or Part 2 did you list the original creditor? 111 W JACKSON BLVD S-400 of (Check Part 1: Creditors with Priority Unsecured Claims one): Number Street Part 2: Creditors with Nonpriority Unsecured CHICAGO Illinois 60604 Last 4 digits of account number City State Zip Code IL Secretary of State On which entry in Part 1 or Part 2 did you list the original creditor? Name of (Check 2701 S. Dirksen Parkway Line 4.4 Part 1: Creditors with Priority Unsecured Claims one): Number Street Part 2: Creditors with Nonpriority Unsecured

Last 4 digits of account number

Springfield

City

Illinois

State

62723

Zip Code

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Debtor 1 Makeyla S. Calvin Case number (if known)
First Name Middle Name Last Name

| FIISLINAI | ne Middle Name Last Name | | |
|--------------------------|---|---------|-------------------------------|
| Part 4: Add th | ne Amounts for Each Type of Unsecured Claim | | |
| | mounts of certain types of unsecured claims. This information is nounts for each type of unsecured claim. | s for s | tatistical reporting purposes |
| | | | Total claims |
| Total claims from Part 1 | 6a. Domestic support obligations. | 6a. | \$0.00 |
| | 6b. Taxes and certain other debts you owe the government | 6b. | \$0.00 |
| | 6c. Claims for death or personal injury while you were intoxicated | 6c. | \$0.00 |
| | 6d. Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$0.00 |
| | 6e. Total. Add lines 6a through 6d. | 6e. | \$0.00 |
| | | | Total claims |
| Total claims from Part 2 | 6f. Student loans | 6f. | \$6,597.00 |
| | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$0.00 |
| | 6h. Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$0.00 |
| | 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$24,138.00 |
| | 6j. Total. Add lines 6f through 6i. | 6j. | \$30,735.00 |

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| Fill in this information to identify your case: | | | | | | | | |
|---|---------------------------|-------------|----------------------|--|--|--|--|--|
| Debtor 1 | Makeyla | S. | Calvin | | | | | |
| | First Name | Middle Name | Last Name | | | | | |
| Debtor 2 | | | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | | | |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois | | | | | |
| Case number | | | (State) | | | | | |

Official Form 106G

Check if this is an amended filing

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
- Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

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| | | D00 | differit i ag | C 34 01 73 |
|---------------------|---|------------------------------|--------------------------|---|
| Fill in this info | rmation to identify your case: | : | | |
| Debtor 1 | Makeyla | S. | Calvin | |
| Debtor 2 | First Name | Middle Name | Last Name | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States I | Bankruptcy Court for the: No | orthern | District of Illinois | |
| Case number | | | (State) | |
| (If known) | | | | Check if this is a |
| Official | Form 106U | | | amended filing |
| Official | Form 106H | | | |
| Schedul | le H: Your Codel | otors | | 12/1 |
| • | er every question. ave any codebtors? (If you a | re filing a joint case, do n | ot list either spouse as | a codebtor.) |
| | ne last 8 years, have you live puisiana, Nevada, New Mexico, | | | ? (Community property states and territories include Arizona, California, n.) |
| | Go to line 3. | | 3 , | , |
| Yes | s. Did your spouse, former sp | ouse, or legal equivale | nt live with you at the | time? |
| _ | No | | | |
| | Yes. In which community sta | ate or territory did you I | ive? | Fill in the name and current address of that person. |
| | Name of your spouse, form | er spouse, or legal equiva | alent | |
| | Number Street | | | |
| | City | State | Zin Co | nde . |

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

Column 1: Your codebtor

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| | | | | 9 | | | |
|---|---|---|---------------------------------------|-----------------|---------------------|--|-----------------------|
| Fill in this in | nformation to identify | your case: | | | | | |
| Debtor 1 | Makeyla | S. | Calvin | | | | |
| | First Name | Middle Name | Last N | ame | Che | eck if this is: | |
| Debtor 2 (Spouse, if filing | g) First Name | Middle Name | Last N | ame | — I п | An amended filing | |
| | | | | | | A supplement showing pos | t-petition chapter 13 |
| the: | s Bankruptcy Court for | Northern | District of Illi | nois itate) | | expenses as of the following | |
| Case number | er | | | | | | |
| (If known) | | | | | | MM / DD / YYYY | |
| Official | Form 106I | | | | | | |
| Schedu | ule I: Your In | come | | | | | 12/15 |
| information spouse. If m number (if k | about your spouse. I | f you are separated and , attach a separate she y question. | d your spous | se is not filin | g with you, do | r spouse is living with yo not include information ional pages, write your i | about your |
| _ | our employment | | Debtor 1 | | | Debtor 2 | |
| informat | tion. | Employment status | ✓ Emplo | wod | | Employed | |
| | If you have more than one job, attach a separate page with information about additional | , | | nployed | | Not Employed | |
| informati | | | | | | | |
| employe | | Occupation | DSP | | | <u> </u> | |
| | oart time, seasonal, or loyed work. | Employer's name | Individual | Advocacy Grou | p, Inc. | | |
| - | ion may include student | Employer's address | 1289 Windham Parkway Number Street | | | | |
| | maker, if it applies. | | | | | Number Street | |
| | | | | | | | |
| | | | | | | _ | |
| | | | Romeoville | | 60446 | - | |
| | | | City | State | Zip Code | City Stat | e Zip Code |
| | | How long employed there? | 10 years 7 | months | | | |
| Part 2: G | ive Details About N | | | | | | |
| | nonthly income as of tests you are separated. | the date you file this form | n. If you have | nothing to rep | ort for any line, v | vrite \$0 in the space. Includ | e your non-filing |
| | ur non-filing spouse hav e, attach a separate she | | combine the | information for | all employers fo | or that person on the lines b | elow. If you need |
| | | | | For | Debtor 1 | For Debtor 2 or non-filing spouse | |
| | | ary, and commissions (befo , calculate what the monthly | | 2. | \$2,350.40 | | |
| 3. Estima | ate and list monthly ove | rtime pay. | | 3. | + \$0.00 | | |
| 4. Calculate gross income. Add line 2 + line 3. | | | | | \$2,350.40 | | |

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| Debtor 1 Makeyla First Na | | Calvin Last Name | | Case numbe | er <i>(if</i> | | |
|--|--|-------------------------|--------------|-----------------------|-----------------------------------|------------|-------------------------|
| 7 1104 1144 | | 24011441110 | | For Debtor 1 | For Debtor 2 or non-filing spouse | | |
| Copy line 4 h | ere | → | 4. | \$2,350.40 | | 4 | |
| 5. List all payro | | | | | | | |
| 5a. Tax, Med | care, and Social Security deductions | | 5a. | \$287.17 | | | |
| 5b. Mandato | ry contributions for retirement plans | | 5b. | \$0.00 | | | |
| 5c. Voluntary | contributions for retirement plans | | 5c. | \$0.00 | | | |
| 5d. Required | repayments of retirement fund loans | | 5d. | \$0.00 | | | |
| 5e. Insurance | • | | 5e. | \$0.00 | | | |
| 5f. Domestic | support obligations | | 5f. | \$0.00 | | | |
| 5g. Union du | es | | 5g. | \$0.00 | | | |
| 5h. Other de | ductions. Specify: | | 5h. + | \$0.00 + | + | | |
| | oll deductions. Add lines 5a + 5b + 5c + 5d | + 5e +5f + 5g | 6. | \$287.17 | | | |
| | al monthly take-home pay. Subtract line 6 t | from line 4. | 7. | \$2,063.23 | | | |
| 8. List all other | income regularly received: | | | | | | |
| | ne from rental property and from operatin profession, or farm | ng a | | | | | |
| gross rece | tatement for each property and business sho ipts, ordinary and necessary business expensionthly net income. | ses, and | 8a. | \$0.00 | | | |
| 8b. Interest a | and dividends | 8 | 3b. | \$0.00 | | | |
| | pport payments that you, a non-filing spo It regularly receive | ouse, or a | | | | | |
| | mony, spousal support, child support, maint ttlement, and property settlement. | | Вс. | \$0.00 | | | |
| 8d. Unemplo | yment compensation | 8 | Bd. | \$0.00 | | | |
| 8e. Social Se | curity | | Be. | \$0.00 | | | |
| Include ca cash assis | ernment assistance that you regularly recast assistance and the value (if known) of any tance that you receive, such as food stamps Supplemental Nutrition Assistance Program) outsidies | non- (benefits or | | 00.00 | | | |
| 0 | | _ | 8f. | \$0.00 | | | |
| , e | or retirement income | | 8g. | \$0.00 \$150.00 + | | | |
| | inthly income. Specify: Est. Prorated Tax Re | | 3h. + - Г | | | 7 | |
| 9. Add all other | income Add lines 8a + 8b + 8c + 8d + 8e + | oi +oy + oii. | 9. | \$150.00 | | <u>.</u> . | |
| | onthly income. Add line 7 + line 9. s in line 10 for Debtor 1 and Debtor 2 or non | | 10. | \$2,213.23 | + | = [| \$2,213.23 |
| Include contri friends or rela | er regular contributions to the expenses outions from an unmarried partner, members ives. e any amounts already included in lines 2-10 | of your household | l, your d | lependents, your room | | | |
| Specify: | • | | | , , , , , , , | | 11. + | \$0.00 |
| | | | | | | 1 | |
| 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the <i>Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data</i> , if it applies | | | | | | | |
| | | | | | | | Combined monthly income |
| 13. Do you expe | ct an increase or decrease within the yea | ar after you file th | is form' | • | | | |
| | n | | | | | | |
| Yes. Exp | lain: | | | | | | |

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| | | Docu | ment Page 37 of 75 | • | |
|------------------------------------|----------------------------------|--|---|-------------------|---|
| Fill in this infor | mation to identify y | our case: | | | |
| Debtor 1 | Makeyla First Name | S. Middle Name | Calvin Last Name | | |
| Debtor 2 | i not riamo | Wildel Name | Last Name | Check if this is: | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | An amended fili | ng |
| United States E | Bankruptcy Court for | the: Northern [| District of Illinois (State) | | howing post-petition chapter 13 the following date: |
| Case number (If known) | | | | MM / DD / YYY | / |
| Official | Form 106 | J | | | |
| | e J: Your E | _ | | | 12/1 |
| information. If | | possible. If two married people ar ded, attach another sheet to this | | | |
| Part 1: Des | cribe Your Hous | ehold | | | |
| 1. Is this a joi | nt case? | | | | |
| ✓ No. Go | o to line 2 | | | | |
| Yes. D | oes Debtor 2 live in | a separate household? | | | |
| | No | | | | |
| | Yes. Debtor 2 mu | ust file Official Forms 106J-2, Expen | ses for Separate Household of Debt | or 2. | |
| 2. Do you hav | e dependents? | No | | | |
| Do not list D Debtor 2. | Debtor 1 and | Yes. Fill out this information for each dependent | Dependent's relationship to Debtor 1 or Debtor 2 | Dependent's age | Does dependent live with you? |
| | | | Child | 10 years | No. |
| | | | | | ✓ Yes. |
| expenses o | penses include f people other | No | | | |
| than yourself and dependents | _ | Yes | | | |
| Part 2: Esti | mate Your Ongo | ing Monthly Expenses | | | |
| | of a date after the b | ur bankruptcy filing date unless y pankruptcy is filed. If this is a sup | | | |
| | • | on-cash government assistance i led it on <i>Schedule I: Your Incom</i> e | - | | Your expenses |
| | or home ownershi | p expenses for your residence. In 4. | clude first mortgage payments and | | \$400.00 |
| If not incl | uded in line 4: | | | | |

4a

4b.

4c.

4d.

\$0.00

\$0.00

\$0.00

\$0.00

4a. Real estate taxes

4b. Property, homeowner's, or renter's insurance

4c. Home maintenance, repair, and upkeep expenses

4d. Homeowner's association or condominium dues

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Debtor 1 Makeyla S. Calvin Case number (if known)
First Name Middle Name Last Name

| | | Your expenses |
|---|------------|---------------|
| 5. Additional mortgage payments for your residence, such as home equity loans | 5. | \$0.00 |
| 6. Utilities: | | |
| 6a. Electricity, heat, natural gas | 6a. | \$250.00 |
| 6b. Water, sewer, garbage collection | 6b. | \$0.00 |
| 6c. Telephone, cell phone, Internet, satellite, and cable services | 6c. | \$175.00 |
| 6d. Other. Specify: | 6d | \$0.00 |
| 7. Food and housekeeping supplies | 7. | \$600.00 |
| 8. Childcare and children's education costs | 8. | \$0.00 |
| 9. Clothing, laundry, and dry cleaning | 9. | \$150.00 |
| 10. Personal care products and services | 10. | \$85.00 |
| 11. Medical and dental expenses | 11. | \$53.00 |
| 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments | 12. | \$325.00 |
| 13. Entertainment, clubs, recreation, newspapers, magazines, and books | 13. | \$0.00 |
| 14. Charitable contributions and religious donations | 14. | \$0.00 |
| 15. Insurance.Do not include insurance deducted from your pay or included in lines 4 or 20. | | |
| 15a. Life insurance | 15a | \$0.00 |
| 15b. Health insurance | 15b | \$0.00 |
| 15c. Vehicle insurance | 15c | \$0.00 |
| 15d. Other insurance. Specify: | 15d | \$0.00 |
| 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. | | |
| Specify: | 16 | \$0.00 |
| 17. Installment or lease payments: | | |
| 17a. Car payments for Vehicle 1 | 17a | \$0.00 |
| 17b. Car payments for Vehicle 2 | 17b | \$0.00 |
| 17c. Other. Specify: | 17c | \$0.00 |
| 17d. Other. Specify: | 17d | \$0.00 |
| 18. Your payments of alimony, maintenance, and support that you did not report as deducted from | | \$0.00 |
| your pay on line 5, Schedule I, Your Income (Official Form 106I). | 18. | |
| 19.Other payments you make to support others who do not live with you. | | * |
| Specify: | 19. | \$0.00 |
| 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property | 20a | \$0.00 |
| 20b. Real estate taxes. | 20a 20b | \$0.00 |
| 20c. Property, homeowner's, or renter's insurance | 20b 20c | \$0.00 |
| 20d. Maintenance, repair, and upkeep expenses. | 20d | \$0.00 |
| 20e. Homeowner's association or condominium dues | 20d 20e | \$0.00 |
| | 208 | φυ.υυ |

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| Debtor 1 | | | S. | Calvin | Case number (if known) | | | |
|--|---------------|------------------------|---------------------|------------------------------|------------------------|-----|---|------------|
| | First Name | | Middle Name | Last Name | | | | |
| 21. Othe | r. Specify: | | | | | 21 | | \$0.00 |
| | | | | | | | | |
| | • | monthly expenses. | | | | | | \$2,038.00 |
| | | through 21. | | | | | | \$0.00 |
| | . , | ` , , | ,, | , from Official Form 106J-2 | 2 | | _ | \$2,038.00 |
| 22c. / | Add line 22 | a and 22b. The result | is your monthly exp | enses. | | 22. | | |
| 23.Calcu | ılate your ı | monthly net income | | | | | | |
| 23a. (| Copy line 12 | 2 (your combined mo | onthly income) from | Schedule I. | | 23a | _ | \$2,213.23 |
| 23b. | Copy your i | monthly expenses fro | m line 22 above. | | | 23b | | \$2,038.00 |
| 23c. S | Subtract you | ur monthly expenses | from your monthly | ncome. | | | | \$175.23 |
| | The result is | s your monthly net in | come. | | | 23c | _ | • |
| 24 Do v | ou evnect | an increase or decr | ease in vour evner | ses within the year after | you file this form? | | | |
| 24. DO y | ou expect | an increase or decr | ease iii your expen | ses within the year after | you me this form: | | | |
| | | | | loan within the year or do | | | | |
| mon | gage paym | ent to increase or dec | crease decause of a | modification to the terms o | r your mortgage? | | | |
| □ 1 | No | | | | | | | |
| <u>\\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ </u> | res . | | | | | | | |
| \Delta | | | | | | | | |
| | | plain here: | | | | | | |
| | | ebtor resides with he | r mother and helps | with rent and utility bills. | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |

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| Fill in this infor | rmation to identify your ca | ase: | | |
|---|-----------------------------|-------------|------------------------------|--|
| Debtor 1 | Makeyla | S. | Calvin | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States Bankruptcy Court for the: | | Northern | District of Illinois (State) | |
| Case number | | | (Otate) | |

Official Form 106Dec

| П | Check if this is an |
|---|---------------------|
| _ | amended filing |

Declaration About an Individual Debtor's Schedules

If two married people are filing together, both are equally responsible for supplying correct information.

12/15

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining

whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Par | t 1: Sign Below | | | | | | |
|-----|--|---|--|--|--|--|--|
| | Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? | | | | | | |
| | ✓ No | | | | | | |
| | Yes. Name of person | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). | | | | | |
| | | | | | | | |
| | | | | | | | |
| | Under penalty of perjury, I declare that I have read the summary a that they are true and correct. | and schedules filed with this declaration and | | | | | |
| × | · | × | | | | | |
| | Signature of Debtor 1 | Signature of Debtor 2 | | | | | |
| | Date 2/15/2018 | Date | | | | | |
| | MM/DD/YYYY | MM/DD/YYYY | | | | | |

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| and accurate as p lore space is need n). Answer every of etails About You | S. Middle Middle: Northern al Affairs 1 ossible. If two many many many many many many many many | Name Last Nam District of Illino (State) For Individuals District of Illino (State) District of Illino (State) | e is | responsible for | Check if this is amended filing |
|--|--|--|--|---|--|
| orm 107 of Financi and accurate as paore space is need in). Answer every details About Your | Middle Middle Northem Al Affairs 1 ossible. If two maled, attach a separation. | Name Last Nam Name Last Nam District of Illino (State) For Individuals parried people are filing parate sheet to this form | Filing for Bankru | responsible for | amended filing |
| orm 107 of Financi and accurate as pore space is need in). Answer every details About Your | Middle : Northern al Affairs 1 ossible. If two maled, attach a sepon s | Name Last Nam District of Illino (State) For Individuals District of Illino (State) District of Illino (State) | Filing for Bankru | responsible for | amended filing |
| of Financi and accurate as pore space is need in). Answer every details About Your | al Affairs 1 ossible. If two meled, attach a sepuestion. | District of Illino (State | Filing for Bankru | responsible for | amended filing |
| of Financi of Financi and accurate as p ore space is need n). Answer every of etails About Your | al Affairs 1 ossible. If two m led, attach a sep question. | for Individuals parried people are filing parate sheet to this form | Filing for Bankru | responsible for | amended filing |
| of Financi and accurate as p ore space is need n). Answer every of etails About You | ossible. If two m led, attach a sep question. | for Individuals parried people are filing parate sheet to this form | Filing for Bankru | responsible for | amended filing |
| of Financi and accurate as p ore space is need n). Answer every of etails About You | ossible. If two m led, attach a sep question. | narried people are filing operate sheet to this form | together, both are equally | responsible for | amended filing |
| of Financi and accurate as p ore space is need n). Answer every of etails About You | ossible. If two m led, attach a sep question. | narried people are filing operate sheet to this form | together, both are equally | responsible for | amended filing |
| and accurate as p lore space is need n). Answer every of etails About You | ossible. If two m led, attach a sep question. | narried people are filing operate sheet to this form | together, both are equally | responsible for | |
| ore space is need n). Answer every of etails About You | led, attach a sep question. | parate sheet to this form | | | supplying correct |
| n). Answer every etails About You | question. | | . On the top of any addition | iliai payes, wille | |
| | r Marital Status | | | | your name and case |
| | r Maritai Status | | Defens | | |
| | | and Where You Lived | Before | | |
| ır current marital s | tatus? | | | | |
| d | | | | | |
| | | | | | |
| arica | | | | | |
| last 3 years, have y | ou lived anywher | e other than where you liv | ve now? | | |
| | | | | | |
| st all of the places | ou lived in the las | st 3 years. Do not include v | where you live now. | | |
| | | - | - | | |
| 1: | | Dates Debtor 1 lived there | Debtor 2: | | Dates Debtor 2 lived there |
| | | | Same as Debtor 1 | | Same as Debtor 1 |
| | | | L came as 2 societies | | came do 2 sociel : |
| | 03 | From | Number Street | | From |
| a oueet | | | | | |
| a Illinaia | 60650 | | | | |
| State | Zip Code | | City State | Zip Code | |
| | | | Same as Debtor 1 | | Same as Debtor 1 |
| | | | ш | | ш |
| | | From | Number Street | | From |
| Tenth Ave r Street | | | | | |
| Tenth Ave r Street | | To | | | To |
| | 60901 | To | | | To |
| | st all of the places y 1: ord City Drive Apt. 2 or Street | last 3 years, have you lived anywher st all of the places you lived in the last 1: ord City Drive Apt. 203 or Street D. Illinois 60652 | last 3 years, have you lived anywhere other than where you livest all of the places you lived in the last 3 years. Do not include to a live of the places you lived in the last 3 years. Do not include to a lived there Dates Debtor 1 lived there | It is all of the places you lived in the last 3 years. Do not include where you live now. Dates Debtor 1 lived there Debtor 2: Same as Debtor 1 Same as Debtor 1 It is all of the places you lived in the last 3 years. Do not include where you live now. Dates Debtor 1 lived there Debtor 2: In Same as Debtor 1 Number Street Debtor 2: City State | last 3 years, have you lived anywhere other than where you live now? St all of the places you lived in the last 3 years. Do not include where you live now. Dates Debtor 1 lived there Debtor 2: Same as Debtor 1 Same as Debtor 1 Number Street Debtor 2: City State Zip Code |

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| | Makeyla S. First Name Middle | Calvir e Name Last N | | number (if known) | |
|------------------------------------|--|---|---|--|---|
| rt 2: | Explain the Sources of Your Inc | come | | | |
| Fill ir | you have any income from employm n the total amount of income you recei ities. If you are filing a joint case and yo No Yes. Fill in the details. | ved from all jobs and all bu | sinesses, including part-time | | years? |
| | | Debtor 1 | | Debtor 2 | |
| | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| | om January 1 of current year until e date you filed for bankruptcy: | Wages, commissions, bonuses, tips Operating a business | \$3471.36 | Wages, commissions, bonuses, tips Operating a business | |
| | r last calendar year: anuary 1 to December 31, 2017) YYYY | Wages, commissions, bonuses, tips Operating a business | \$27420.06 | Wages, commissions, bonuses, tips Operating a business | |
| | r the calendar year before that: anuary 1 to December 31, 2016) YYYY | Wages, commissions, bonuses, tips Operating a business | \$27000.00 | Wages, commissions, bonuses, tips Operating a business | |
| | | | | | |
| Inclu publi filing | you receive any other income during de income regardless of whether that is come to be | ncome is taxable. Examples come; interest; dividends; r you received together, list i | of other income are alimony; money collected from lawsuits; t only once under Debtor 1. | ; royalties; and gambling and | |
| Inclu publi filing List e | de income regardless of whether that in c benefit payments; pensions; rental in a joint case and you have income that each source and the gross income from | ncome is taxable. Examples come; interest; dividends; r you received together, list i | of other income are alimony; money collected from lawsuits; t only once under Debtor 1. | ; royalties; and gambling and | |
| Inclu publi filing List e | de income regardless of whether that in c benefit payments; pensions; rental in a joint case and you have income that each source and the gross income from | ncome is taxable. Examples come; interest; dividends; r you received together, list in each source separately. D | of other income are alimony; money collected from lawsuits; t only once under Debtor 1. | ; royalties; and gambling and listed in line 4. | Gross income from each source |
| Inclu publi filing List 6 | de income regardless of whether that in c benefit payments; pensions; rental in a joint case and you have income that each source and the gross income from | ncome is taxable. Examples come; interest; dividends; r you received together, list in each source separately. D Debtor 1 Sources of income | Gross income from each source (before deductions) | royalties; and gambling and listed in line 4. Debtor 2 Sources of income | Gross income from each source (before deductions and |
| Inclupubli filing List c | de income regardless of whether that in come that income that income that income that income that in a joint case and you have income that each source and the gross income from No Yes. Fill in the details. | ncome is taxable. Examples come; interest; dividends; r you received together, list in each source separately. D Debtor 1 Sources of income | Gross income from each source (before deductions and exclusions) | royalties; and gambling and listed in line 4. Debtor 2 Sources of income | Gross income from each source (before deductions and |

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Debtor 1 Makeyla Calvin Case number (if known) Middle Name Last Name List Certain Payments You Made Before You Filed for Bankruptcy Part 3: 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of payment Total amount paid Amount you still owe Was this payment for... Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment

City

State

Zip Code

Suppliers or vendors
Other

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| or 1 | Makeyla | | S. | | alvin | Case number | (if known) |
|--------------------|--|--|--|--|---|--|---|
| | First Name | | Middle Name | Las | st Name | | |
| nsi corp age | ders include your porations of whic | relatives; a h you are a for a busin | any general partner an officer, director, ness you operate a | s; relatives of any person in control | general partners; par , or owner of 20% or | tnerships of which y more of their voting | who was an insider? you are a general partner; g securities; and any managing r domestic support obligations, |
| ✓ | No | | | | | | |
| Ш | Yes. List all pay | ments to a | an Insider. | Dates of payment | Total amount paid | Amount you still owe | Reason for this payment |
| | Insider's Name | | | | | | |
| | Number Street | | | | | | |
| | | | | | | | |
| | City | State | Zip Code | | | | |
| | Insider's Name | | | | | | |
| | Number Street | | | | | | |
| | | | | | | | |
| | City | State | Zip Code | | | | |
| | No | _ | aranteed or cosigne | · | Total amount paid | Amount you still owe | Reason for this payment Include creditor's name |
| | Insider's Name | | | | | | |
| | Number Street | | | | | | |
| | City | State | Zip Code | | | | |
| | Insider's Name | | | | | | |
| | Number Street | | | | | | |
| | | | | | | | |
| | City | State | Zip Code | | | | |

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Debtor 1 Makeyla Calvin Case number (if known) Middle Name First Name Last Name Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No **V** Yes. Fill in the details. Status of the case Nature of the case Court or agency Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Value of the Describe the property Date property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied. Describe the property Date Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed.

City

State

Zip Code

Property was garnished.

Property was attached, seized, or levied.

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| Deb | tor 1 Makeyla First Name | S. Middle Name | Calvin Last Name | Case number (if known) | |
|------|--|-----------------------------|--------------------------------|--|---------------------|
| 11. | | u filed for bankruptcy, did | any creditor, including a ba | ank or financial institution, set off any am | ounts from your |
| | No Yes. Fill in the details. | | | | |
| | | | Describe the action the | creditor took Date action was taken | Amount |
| | Creditor's Name | | | | |
| | Number Street | | Last 4 digits of account n | umber: XXXX- | |
| | | | | | |
| | City Sta | · | | | |
| 12. | Within 1 year before you f appointed receiver, a cus | | | ossession of an assignee for the benefit o | creditors, a court- |
| | ✓ No Yes | | | | |
| Part | 5: List Certain Gifts a | nd Contributions | | | |
| 13. | Within 2 years before you | u filed for bankruptcy, dic | l you give any gifts with a to | tal value of more than \$600 per person? | |
| | ✓ No Yes. Fill in the details | s for each gift. | | | |
| | Gifts with a total valu | ue of more than \$600 | Describe the gifts | Dates you gave the gifts | Value |
| | Person to Whom You | Gave the Gift | | | <u> </u> |
| | | | | | |
| | Number Street | | | | |
| | City Sta | · | | | |
| | Person to Whom You | Gave the Gift | | | |
| | Number Street | | | | |
| | City Sta Person's relationship to | • | | | |

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| | Makeyla | S. | Calvin | Case number <i>(if known)</i> | | |
|----------|---|---|---|-------------------------------|--------------------------------|--------------------|
| | First Name | Middle Name | Last Name | | | |
| \A/:- | thin O was a bafana waw | filad far hamlerentare d | | with a tatal value of many | +ho= #600 | ta anu aharitu? |
| WI | tnin 2 years before you | filed for bankruptcy, d | id you give any gifts or contributions | with a total value of more | tnan \$600 | to any charity? |
| ✓ | No | | | | | |
| Г | Yes. Fill in the details t | or each gift or contribu | ution. | | | |
| | Gifts or contributions | to charities | Describe what you contributed | Dai | te you | Value |
| | that total more than | | Describe what you contributed | | ntributed | varue |
| | | | | | | |
| | Oh - 2h I - Nove | | <u> </u> | _ | | |
| | Charity's Name | | | | | |
| | | | - | | | |
| | Number Street | | _ | | | |
| | Number Street | | | | | |
| | City Star | e Zip Code | - | | | |
| | - | | | | | |
| 6: | List Certain Losses | | | | | |
| | | | | | | |
| | | led for bankruptcy or s | since you filed for bankruptcy, did you | lose anything because of | of theft, fire, | other disaster, or |
| gai | mbling? | | | | | |
| ~ | No | | | | | |
| F | Yes. Fill in the details. | | | | | |
| | Describe the property | value loot and | Describe any insurance covera | go for the less Do | te of your | Value of property |
| | how the loss occurre | | Include the amount that insurance | | - | lost |
| | | | pending insurance claims on line | | | |
| | | | A/B: Property. | | | |
| | | | | | | |
| | | | | | | |
| | ciude any attorneys, banki | | or credit counseling agencies for service | s required in your bankiup | .cy. | |
| ✓ | No | | or credit counseling agencies for service | s required in your bankiup | cy. | |
| | | | or credit counseling agencies for service | s required in your paintup | cy. | |
| | No | | Description and value of any pr | pperty Dat | e payment | Amount of |
| | No | | | operty Dat | e payment ransfer | Amount of payment |
| | No Yes. Fill in the details. | | Description and value of any pr transferred | operty Dat or t wa: | e payment ransfer s made | payment |
| | No Yes. Fill in the details. Semrad Law Firm | | Description and value of any pr | operty Dat or t wa: | e payment ransfer | |
| | No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid | | Description and value of any pr transferred | operty Dat or t wa: | e payment ransfer s made | payment |
| | No Yes. Fill in the details. Semrad Law Firm | | Description and value of any pr transferred | operty Dat or t wa: | e payment ransfer s made | payment |
| | No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Aver | | Description and value of any pr transferred | operty Dat or t wa: | e payment ransfer s made | payment |
| | Semrad Law Firm Person Who Was Paid 11101 S. Western Aver Number Street | ue | Description and value of any pr transferred | operty Dat or t wa: | e payment ransfer s made | payment |
| | Semrad Law Firm Person Who Was Paid 11101 S. Western Aver Number Street Chicago Illing | ue Dis 60643 | Description and value of any pr transferred | operty Dat or t wa: | e payment ransfer s made | payment |
| | Semrad Law Firm Person Who Was Paid 11101 S. Western Aver Number Street | ue Dis 60643 | Description and value of any pr transferred | operty Dat or t wa: | e payment ransfer s made | payment |
| | Semrad Law Firm Person Who Was Paid 11101 S. Western Aver Number Street Chicago Illing | ois 60643 de Zip Code | Description and value of any pr transferred | operty Dat or t wa: | e payment ransfer s made | payment |
| | Semrad Law Firm Person Who Was Paid 11101 S. Western Aver Number Street Chicago Illin City Star | ois 60643 ie Zip Code | Description and value of any pr transferred | operty Dat or t wa: | e payment ransfer s made | payment |
| | Semrad Law Firm Person Who Was Paid 11101 S. Western Aver Number Street Chicago Illino City Star | ois 60643 ie Zip Code | Description and value of any pr transferred | operty Dat or t wa: | e payment ransfer s made | payment |
| | Semrad Law Firm Person Who Was Paid 11101 S. Western Aver Number Street Chicago Illin City Star | ois 60643 ie Zip Code | Description and value of any pr transferred | operty Dat or t wa: | e payment ransfer s made | payment |
| | Semrad Law Firm Person Who Was Paid 11101 S. Western Aver Number Street Chicago Illin City Star | ois 60643 ie Zip Code | Description and value of any pr transferred | operty Dat or t wa: | e payment ransfer s made | payment |
| | Semrad Law Firm Person Who Was Paid 11101 S. Western Aver Number Street Chicago Illing City Star Email or website address Person Who Made the | ois 60643 ie Zip Code | Description and value of any pr transferred | operty Dat or t wa: | e payment ransfer s made | payment |
| | Semrad Law Firm Person Who Was Paid 11101 S. Western Aver Number Street Chicago Illing City State Email or website address Person Who Made the | ois 60643 ie Zip Code | Description and value of any pr transferred | operty Dat or t wa: | e payment ransfer s made | payment |
| | Semrad Law Firm Person Who Was Paid 11101 S. Western Aver Number Street Chicago Illing City Star Email or website address Person Who Made the | ois 60643 ie Zip Code | Description and value of any pr transferred | operty Dat or t wa: | e payment ransfer s made | payment |
| | Semrad Law Firm Person Who Was Paid 11101 S. Western Aver Number Street Chicago Illing City Star Email or website address Person Who Made the | ois 60643 ie Zip Code | Description and value of any pr transferred | operty Dat or t wa: | e payment ransfer s made | payment |
| | Semrad Law Firm Person Who Was Paid 11101 S. Western Aver Number Street Chicago Illing City Star Email or website address Person Who Made the | ois 60643 e Zip Code ss Payment, if Not You | Description and value of any pr transferred | operty Dat or t wa: | e payment ransfer s made | payment |
| | Semrad Law Firm Person Who Was Paid 11101 S. Western Aver Number Street Chicago Illing City Star Email or website addres Person Who Made the Person Who Was Paid Number Street | pois 60643 re Zip Code re Zip Code | Description and value of any pr transferred | operty Dat or t wa: | e payment ransfer s made | payment |
| | Semrad Law Firm Person Who Was Paid 11101 S. Western Aver Number Street Chicago Illini City Star Email or website addres Person Who Made the Person Who Was Paid Number Street | pois 60643 re Zip Code re Zip Code | Description and value of any pr transferred | operty Dat or t wa: | e payment ransfer s made | payment |
| | Semrad Law Firm Person Who Was Paid 11101 S. Western Aver Number Street Chicago Illing City Star Email or website addres Person Who Made the Person Who Was Paid Number Street | pis 60643 re Zip Code re Zip Code | Description and value of any pr transferred | operty Dat or t wa: | e payment ransfer s made | payment |

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| Debtor | 1 Makeyla S. | Calvin | Case number (if know | n) | |
|-----------------|--|--|--------------------------------------|--|------------------------------|
| | First Name Middle Na | ame Last Name | | | |
| h | fithin 1 year before you filed for bankrup elp you deal with your creditors or to ma o not include any payment or transfer that y | ke payments to your creditors | | er any property to anyon | e who promised to |
| <u>·</u> | No Yes. Fill in the details. | | | | |
| _ | _ | Description and v transferred | alue of any property | Date Am payment or transfer was made | ount of payment |
| | Person Who Was Paid | | | | |
| | Number Street | | | | |
| | City State Zip C | ode | | | |
| th In | Pithin 2 years before you filed for bankrup the ordinary course of your business or fire clude both outright transfers and transfers and transfers that you have already listed on the list of the lis | nancial affairs? made as security (such as the gra | | | - |
| _ | _ | Description and v transferred | | ny property or eceived or debts paid e | Date transfer was made |
| | Person Who Received Transfer | | | | |
| | Number Street | | | | |
| | City State Zip C Person's relationship to you | dode | | | |
| | Person Who Received Transfer | | | | |
| | Number Street | | | | |
| | City State Zip C Person's relationship to you | ode | | | |
| be (T | Tithin 10 years before you filed for bankri eneficiary? These are often called asset-protection device | | perty to a self-settled trust or sin | milar device of which yo | u are a |
| Ē | Yes. Fill in the details. | | | | Dili |
| | | Description and | value of the property transferred | | Date transfer was made |
| | Name of trust | | | | |

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Debtor 1 Makeyla Calvin Case number (if known) Middle Name Last Name List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8: 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of account Type of account or Date Last balance account was before number instrument closed, sold, closing or moved, or transfer transferred XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? No Name of Financial Institution Name Yes Number Street Number Street City State Zip Code City Zip Code State 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Do you still Who else had access to it? Describe the contents have it? No Name of Storage Facility Name Number Street Street Number

City

State

State

Zip Code

City

Zip Code

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Calvin Debtor 1 Makeyla Case number (if known) Middle Name Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. Yes. Fill in the details. Where is the property? Describe the contents Value Owner's Name **NumberStreet** Number Street City State Zip Code City State Zip Code Part 10: **Give Details About Environmental Information** For the purpose of Part 10, the following definitions apply: ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street Number Street City State Zip Code City State Zip Code 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street NumberStreet City State Zip Code City State Zip Code

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| Deb | | Makeyla | | S. | | alvin | Cas | e number <i>(it</i> | known) | | |
|------|----------|---|--|-------------------|----------------|----------------------------|--|---------------------|---------------|-----------------|----------------------------------|
| | | First Name | | Middle Name | La | st Name | | | | | |
| 26. | Hav | e you been a part | y in any judic | ial or administ | rative proce | eding under | any environmen | tal law? In | clude settlen | nents and orde | ers. |
| | Ħ | Yes. Fill in the det | tails. | | | | | | | | |
| | Ч | | | | Court or ag | ency | | Nature o | of the case | | Status of the case |
| | | Case title | | | | | | | | | Pending |
| | | | | | Court Name | | _ | | | | On appeal |
| | | Case number | | | NumberStre | et | | | | | Concluded |
| | | - | | | City | State | Zip Code | | | | |
| Pari | t 11: | Give Details Al | oout Your B | usiness or Co | onnections | to Any Bu | siness | | | | |
| 27. | With | nin 4 years before | you filed for | bankruptcy, die | d you own a | business or | have any of the | following c | onnections t | o any business | s? |
| | | A member of A partner in a An officer, di | f a limited liab a partnership rector, or ma | ility company (I | LLC) or limite | ed liability pa oration | activity, either for activity, | ull-time or p | oart-time | | |
| | | | at 10a0t 0 70 0 | . a.o voag o. c | oquity occur | | | | | | |
| | ✓ | No. None of the a | above applies | s. Go to Part 12 | ·. | | | | | | |
| | | Yes. Check all that | at apply abov | e and fill in the | details belo | w for each b | usiness. | | | | |
| | | | | | Desc | ribe the natu | re of the busine | SS | | | umber Do not umber or ITIN. |
| | | Business Name | | | | | | | EIN: | | |
| | | Number Street | | | | | | | Dates busi | ness existed | |
| | | City | State | Zip Code | | e or account | ant or bookkeep | er | From | То | |
| | | | | | | | | | | | |
| | | | | | Desc | ribe the natu | re of the busine | SS | | dentification n | number Do not number or ITIN. |
| | | Business Name | | | | | | | EIN: | | |
| | | Number Street | | | _ | | | | Dates busi | ness existed | |
| | | | | | Name | of account | ant or bookkeep | er | | | |
| | | City | State | Zip Code | | | | | From | To | |
| | | | | | Desc | ribe the natu | re of the busine | ss | | | number Do not umber or ITIN. |
| | | Business Name | | | _ | | | | EIN: | | |
| | | Number Street | | | _ | | | | Dates busi | ness existed | |
| | | City | State | Zip Code | Name | e or account | ant or bookkeep | er | From | То | |
| | | | | | | | | | | | |

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| Deb | otor 1 Makeyla | S. | Calvin | Case number (if known) |
|------|---|--------------------------|---------------------------------|---|
| | First Name | Middle Name | Last Name | |
| 28. | Within 2 years before you to creditors, or other parties. | | ou give a financial stateme | nt to anyone about your business? Include all financial institutions, |
| | ✓ No Yes. Fill in the details b | pelow. | | |
| | _ | | Date issued | |
| | = | | | |
| | Name | | MM/DD/YYYY | |
| | Number Street | | <u> </u> | |
| | City St | ate Zip Code | <u> </u> | |
| Pari | t 12: Sign Below | | | |
| | a bankruptcy case can resul | ū | , | ty, or obtaining money or property by fraud in connection with 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
| | Signature of | , | | Signature of Debtor 2 |
| | Date 2/15/2 | 2018 | | Date |
| ı | Did you attach additional pa | iges to Your Statement o | f Financial Affairs for Individ | luals Filing for Bankruptcy (Official Form 107)? |
| | ✓ No Yes | | | |
| ı | Did you pay or agree to pay | someone who is not an a | ttorney to help you fill out b | ankruptcy forms? |
| | ✓ No | | | |
| i | Yes. Name of person | | | Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |

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B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT

| | | Northern Dist | rict of Illinois | |
|-----|--|------------------------------|-----------------------------------|--|
| re_ | Makeyla S. Calvin | | Case No. | |
| | Debtor | | | (If known) |
| | | | Chapter _ | Chapter 13 |
| | DISCLOSURE OF | COMPENSATION | ON OF ATTORNE | Y FOR DEBTOR |
| 1. | Pursuant to 11 U.S.C. § 329(a) and F compensation paid to me within one rendered or to be rendered on behalf | year before the filing of th | e petition in bankruptcy, or agre | eed to be paid to me, for services |
| | For legal services, I have agreed to ac | ccept | | \$4,000.00 |
| | Prior to the filing of this statement I | nave received | | \$300.00 |
| | Balance Due | | | \$3,700.00 |
| 2 | . The source of the compensation paid | to me was: | | |
| | Debtor | Other (specif | y) | |
| 3 | . The source of the compensation paid | to me is: | | |
| | ✓ Debtor | Other (specif | y) | |
| 4 | I have not agreed to share the ab members and associates of my la | | ion with any other person unles | s they are |
| | I have agreed to share the above members or associates of my law the people sharing in the compe | v firm. A copy of the agree | | |
| 5 | . In return for the above-disclosed fee a. Analysis of the debtor's finan bankruptcy; | | - | bankruptcy case, including: mining whether to file a petition in |
| | b. Preparation and filing of any | petition, schedules, statem | nents of affairs and plan which r | may be required; |
| | c. Representation of the debtor | at the meeting of creditors | and confirmation hearing, and | any adjourned hearings thereof; |
| | d. Representation of the debtor | in adversary proceedings | and other contested bankruptcy | matters; |
| 6 | . By agreement with the debtor(s), the | above-disclosed fee does | not include the following servic | es: |
| | | | | |
| | | CERTIFI | CATION | |
| | certify that the foregoing is a complet or(s) in this bankruptcy proceedings. | e statement of any agreem | nent or arrangement for paymen | t to me for representation of the |
| | 2/15/2018 | | /s/ Morsheda Hashem | |
| | Date | | Signature of Attorney | |
| | | | Semrad Law Firm | |
| | | | Name of law firm | |

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UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.

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6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.

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- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3.If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
- The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:

 Client understands that any funds that client is rendering to The Semrad Law Firm, LLC as part of the advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC in exchange for a commitment by The Semrad Law Firm, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC and will be used for general expense of the firm. Client further understands that it is ordinarily the client's option to deposit funds with an attorney that shall remain client's property as security for future services.

 However, The Semrad Law Firm, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy cases requires many disparate tasks and functions for the attorney and support staff; some of which require legal expertise while other may be only ministerial in nature. Client further understands that the benefit that client is receiving under the fee arrangement is the commitment of The Semrad Law Firm, LLC to perform any and all work reasonably necessary to represent client's interest absent any extraordinary circumstance.
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor*. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00
- 2. In addition, the debtor will pay the filing fee in the case and other expenses of \$371.76
- 3. Before signing this agreement, the attorney has received, \$300.00 toward the flat fee, leaving a balance due of \$3,700.00; and \$61.76 for expenses, leaving a balance due of \$4,071.76
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

| Date: | 2/15/2018 | | |
|-----------|------------|------------------------|--|
| Signed: | | | |
| /s/ Make | yla Calvin | | |
| | | /s/ Morsheda Hashem | |
| Debtor(s) |) | Attorney for Debtor(s) | |

Do not sign if the fee amounts at top of this page are blank.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

| | \$245 | filing fee |
|---|-------|--------------------|
| | \$75 | administrative fee |
| + | \$15 | trustee surcharge |
| | \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

| | \$1,167 | filing fee |
|---|---------|--------------------|
| + | \$550 | administrative fee |
| | \$1,717 | total fee |

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$275 | total fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$200 | filing fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to:
http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit
20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| In re: | Calvin, Makeyla S. | Case No | |
|-----------------|--|--|--------------------------------------|
| | Debtor(s) | Chapter. | Chapter13 |
| | VERIFIC | CATION OF CREDITOR MAT | ГВІХ |
| Ti knowledge | he above named Debtors hereby verify e. | that the attached list of creditors is to | rue and correct to the best of their |
| Date: | 2/15/2018 | /s/ Calvin, Make Calvin, Makeyla Signature of De | S. |

PRESTIGE FINANCIAL SVC 1420 S 500 W SALT LAKE CITY, UT, 84115

DEPT OF ED/NAVIENT PO BOX 9635 WILKES BARRE, PA, 18773

SECURITY CREDIT SERVIC 2653 W OXFORD LOOP OXFORD, MS, 38655

ENHANCED RECOVERY CO L 8014 BAYBERRY RD JACKSONVILLE, FL, 32256

Comcast p.o. box 196 Newark, NJ, 07101

MIDLAND FUNDING PO Box 13105 Roanoke, VA, 24031

JH PORTFOLIO DEBT EQUI 5757 PHANTOM DR STE 225 HAZELWOOD, MO, 63042

PENN CREDIT Po Box 988 Harrisburg, PA, 17108

ALLIED INT 701 Western Ave. Glendale, CA, 91201

FIRST INVST SVC/FIRST 5757 WOODWAY DR STE 400 HOUSTON, TX, 77057

AFSACCEPTANC 1475 W Cyprus Creek Rd Fort Lauderdale, FL, 33309 PEOPLES ENGY 200 EAST RANDOLPH CHICAGO, IL, 60601

FREND FIN CO 6340 SECURITY BLVD SUITE 200 BALTIMORE, MD, 21207

City of Chicago - Parking and red Light Tickets 121 N. LaSalle Street Chicago, IL, 60602

HARRIS & HARRIS LTD 222 Merchandise Mart Plaza, Suite 1900 Chicago, IL, 60654

IL Secretary of State 2701 S. Dirksen Parkway Springfield, IL, 62723

Village of Hazel Crest 3000 West 170TH Place Hazel Crest, IL, 60429

ComEd 1919 Swift Drive Oak Brook, IL, 60523

Advocate Christ Hospital 4440 95th Street Oak Lawn, IL, 60453

Premier bank Card/Charter c/o Emma H Green PO Box 2208 Vacaville, CA, 95696

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.

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6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.

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- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3.If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
- The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:

 Client understands that any funds that client is rendering to The Semrad Law Firm, LLC as part of the advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC in exchange for a commitment by The Semrad Law Firm, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC and will be used for general expense of the firm. Client further understands that it is ordinarily the client's option to deposit funds with an attorney that shall remain client's property as security for future services.

 However, The Semrad Law Firm, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy cases requires many disparate tasks and functions for the attorney and support staff; some of which require legal expertise while other may be only ministerial in nature. Client further understands that the benefit that client is receiving under the fee arrangement is the commitment of The Semrad Law Firm, LLC to perform any and all work reasonably necessary to represent client's interest absent any extraordinary circumstance.
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor*. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. *Discharge of the attorney.* The debtor may discharge the attorney at any time.

F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00
- 2. In addition, the debtor will pay the filing fee in the case and other expenses of \$371.76
- 3. Before signing this agreement, the attorney has received, \$300.00 toward the flat fee, leaving a balance due of \$3,700.00; and \$61.76 for expenses, leaving a balance due of \$4,071.76
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

| Date: | 2/15/2018 | |
|---------|-------------|------------------------------|
| Signed | | |
| /s/ Mak | eyla Calvin | |
| N | M. L | /s/ Morsheda Hashem Mushuh A |
| Debtor(| (s) / () | Attorney for Debtor(s) |

Do not sign if the fee amounts at top of this page are blank.

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| Debtor 1 Makeyla First Name | S. Middle Name | Calvin Last Name | Case number (if known) | - | | |
|---|---|--|--|--|--|--|
| Part 6: Answer These Que | estions for Reporting Purpos | es | | | | |
| 16. What kind of debts do you have? | ☐ No. Go to line 16b. ✓ Yes. Go to line 17. 16b. Are your debts primari | al primarily for a pe ily business debts? r investment or thro | ersonal, family, or household P. Business debts are debts the bugh the operation of the bu | d purpose." hat you incurred to obtain usiness or investment. | | |
| 17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | expenses are paid that | ter 7. Do you estimat | | ty is excluded and administrative reditors? | | |
| 18. How many creditors do you estimate that you owe? | ☑ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999 | lammal . | -5,000 [-10,000 [1-25,000 [| 25,001-50,000 50,001-100,000 More than 100,000 | | |
| 19. How much do you estimate your assets to be worth? | | \$10,00 \$50,00 | 0,001-\$10 million [00,001-\$50 million [00,001-\$100 million [000,001-\$500 million [| \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion | | |
| 20. How much do you estimate your liabilities to be? Part 7: Sign Below | | \$10,00 \$50,00 | 0,001-\$10 million 00,001-\$50 million 00,001-\$100 million 000,001-\$500 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion | | |
| - | I have examined this petition | and I declare unde | er penalty of periury that the | information provided is true and | | |
| For you | correct. If I have chosen to file under of title 11, United States Coounder Chapter 7. If no attorney represents me | Chapter 7, I am aw de. I understand the and I did not pay o | are that I may proceed, if eligerelief available under each or agree to pay someone who | gible, under Chapter 7, 11,12, or 13 chapter, and I choose to proceed is not an attorney to help me fill | | |
| | out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 yes both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. | | | | | |
| | Signature of Debtor 1 Executed on 2/15/20 MM / | 18 DD/YYYY | Signature of Deb Executed on | MM / DD / YYYY | | |

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| Fill in this information to identify your case: | | | | | | | |
|---|------------|-------------|----------------------|--|--|--|--|
| Debtor 1 | Makeyla | S. | Calvin | | | | |
| | First Name | Middle Name | Last Name | | | | |
| Debtor 2 | | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | | |
| United States Bankruptcy Court for the: | | Northern | District of Illinois | | | | |
| Case number | | | (State) | | | | |
| (If known) | | | | | | | |

Official Form 106Dec

Check if this is an amended filing

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Part 1: Sign Below | | | | | |
|---|---|--|--|--|--|
| Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? | | | | | |
| ✓ No | | | | | |
| Yes. Name of person | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). | | | | |
| | | | | | |
| | | | | | |
| | the summary and schedules filed with this declaration and | | | | |
| that they are true and correct. ** /s/ Makeyla Calvin | * ATT WO | | | | |
| Signature of Debtor 1 | Signature of Debtor 2 | | | | |
| Date 2/15/2018 | Date () | | | | |
| MM/DD/YYYY | MM/DD/YYYY | | | | |

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| Deb | otor 1 Makeyla | S. | Calvin | Case number (if known) | | | |
|---|--|-------------|-------------|---|--|--|--|
| | First Name | Middle Name | Last Name | | | | |
| 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institucreditors, or other parties. | | | | | | | |
| | Yes. Fill in the details below | N. | | × | | | |
| | Baseleoons | | Date issued | | | | |
| | | | _ | | | | |
| | Name | | MM/DD/YYYY | | | | |
| | Number Street | | | | | | |
| | | | | | | | |
| | City State | Zip Code | _ | | | | |
| Par | t 12: Sign Below | | | | | | |
| | I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Signature of Debtor 1 | | | | | | |
| | Oignature of Del | Stor r | | Signature of Debtor 2 Date | | | |
| | Date 2/15/2018 | 3 / V | | Date | | | |
| Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? | | | | | | | |
| | ✓ No ☐ Yes | | | | | | |
| Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? | | | | | | | |
| | ☑ No | | | | | | |
| | Yes. Name of person | | | Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). | | | |

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| In re: | Calvin, Makeyla S. Debtor(s) | Case No. | | | | | | |
|---------------------------------|-------------------------------|---|--|--|--|--|--|--|
| | | Chapter. Chapter13 | | | | | | |
| VERIFICATION OF CREDITOR MATRIX | | | | | | | | |
| knowle | | e attached list of creditors is true and correct to the best of their | | | | | | |
| Date: | 2/15/2018 | /s/ Calvin, Makeyla S. Calvin, Makeyla S. Signature of Debtor | | | | | | |

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| Debte | or 1 Makeyla First Name | S. Middle Name | Calvin Last Name | Case number (if known) | | | |
|-------|---|--|--------------------------|---|-----------------|--|--|
| 16. | Calculate the median | family income that applies to y | ou. Follow these step | os: | | | |
| | 16a. Fill in the state in v | vhich you live. | Illinois | _ | | | |
| | 16b. Fill in the number | of people in your household. | 2 | _ | | | |
| | | amily income for your state and s | ize of | | \$67,254.00 | | |
| | household using the link spec | cified in the separate instructions f | | nd a list of applicable median income amounts, go online | | | |
| 17. | using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 17. How do the lines compare? | | | | | | |
| | 17a. Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, Disposable income is not determined under 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NOT fill out Calculation of Disposable Income (Official Form 122C-2). | | | | | | |
| | U.S.C. § 132 | | Calculation of Dispo | neck box 2, Disposable income is determined under 11 posable Income (Official Form 122C-2). On line 39 of that | | | |
| Part | Calculate Your | Commitment Period Under | 11 U.S.C. §1325(| b)(4) | | | |
| 18. | Copy your total average | ge monthly income from line 11 | . | a minima mana kana kana minima na manana na manana na manana manana manana manana manana manana manana manana m | \$2,514.75 | | |
| 19. | | | | is not filing with you, and you contend that calculating the fyour spouse's income, copy the amount from line 13. | | | |
| | 19a. If the marital adjus | tment does not apply, fill in 0 on | line 19a. | | - <u>\$0.00</u> | | |
| | 19b. Subtract line 19a | from line 18. | | | \$2,514.75 | | |
| 20. | Calculate your curren | t monthly income for the year. | Follow these steps: | | | | |
| | 20a. Copy line 19b. | | | | \$2,514.75 | | |
| | Multiply by 12 (the | e number of months in a year). | | | x 12 | | |
| | 20b. The result is your | current monthly income for the ye | ear for this part of the | form. | \$30,177.00 | | |
| | 20c. Copy the median | family income for your state and s | size of household fron | n line 16c. | \$67,254.00 | | |
| 21. | How do the lines com | pare? | | | | | |
| | | an line 20c. Unless otherwise orde d is 3 years. Go to Part 4. | ered by the court, on t | he top of page 1 of this form, check box 3, The | | | |
| | | nan or equal to line 20c. Unless of at period is 5 years. Go to Part 4. | therwise ordered by th | ne court, on the top of page 1 of this form, check box | | | |
| Part | 4: Sign Below | | / | | | | |
| | By signing here, I o | declare under penalty of perjury the | at the information on | this statement and in any attachments is true and correct. | | | |
| | 🗶 /s/ Makeyla | Calvin | | × | | | |
| | Signature of De | | | Signature of Debtor 2 | | | |
| | Date 2/15/20 MM/DD | | | Date MM/DD/YYYY | | | |
| | If you checked 17a | , do NOT fill out or file Form 1220 | | 39 of that form, copy your current monthly income from lin- | e 14 | | |